OVERVIEW: CONTINUOUS QUALITY IMPROVEMENT (CQI) FRAMEWORK

OUTCOME STATEMENT: CHILDREN AND FAMILY WILL HAVE TIMELY ACCESS TO THE SERVICES AND SUPPORT THEY NEED.

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CHAPTER 1: PREVENTION AND EARLY INTERVENTION

OUTCOME STATEMENT: CHILDREN AND FAMILY WILL HAVE TIMELY ACCESS TO THE SERVICES AND SUPPORT THEY NEED.

Goal Statement: Build infrastructure to support at-risk families;

- Primary Prevention – Targeted to general population, aimed at educating the public about child abuse and neglect, with the goal of stopping abuse before it happens.
- Secondary Prevention – Targeted to individual or families in which maltreatment is more likely
- Tertiary Prevention – Targeted toward families in which abuse has already occurred

Safely Decrease the Number of State Wards

Strengths/Opportunities:

May 2014: Reduction of 1,551 wards since March 2012.

Barriers:

Action Items:

Completed:

- 40 Day Focus Initiatives
  - A.) All wards living at home 60 days or more. 421 wards achieved permanency as a result of this initiative.
  - B.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
  - C.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

Planned:

CQI Team Priority:

* Statewide

Data Review Frequency: Quarterly

OUTCOME STATEMENT: Children and Family Will Have Timely Access to the Services and Support They Need

Statewide: Count of Wards 2012-2014

Western Service Area: Count of Wards

*LB 961 directs DHHS to realign the Western, Central, and Northern Service Areas to be coterminous with the District Court judicial districts. The baseline data from July 2, 2012 reflects this geographical change.

Safely Decrease the Number of State Wards

Strengths/Opportunities:

Barriers:

Action Items:

Completed:

- 40 Day Focus Initiatives
    - A.) All wards living at home 60 days or more. 421 wards achieved permanency as a result of this initiative.
    - B.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
    - C.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

Planned:

CQI Team Priority:

* Statewide

OUTCOME STATEMENT: Children and Family Will Have Timely Access to the Services and Support They Need

Central Service Area: Count of Wards

Northern Service Area: Count of Wards

*LB 961 directs DHHS to realign the Western, Central, and Northern Service Areas to be coterminous with the District Court judicial districts. The baseline data from July 2, 2012 reflects this geographical change.

Safely Decrease the Number of State Wards

Strengths/Opportunities:

Barriers:

Action Items:

Completed:
- 40 Day Focus Initiatives
  - A.) All wards living at home 60 days or more. 421 wards achieved permanency as a result of this initiative.
  - B.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
  - C.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

Planned:

CQI Team Priority:
* Statewide

OUTCOME STATEMENT: Children and Family Will Have Timely Access to the Services and Support They Need

Eastern Service Area (NFC): Count of Wards

Southeast Service Area Count of Wards

Data Review Frequency: Quarterly

*LB 961 directs DHHS to realign the Western, Central, and Northern Service Areas to be coterminous with the District Court judicial districts. The baseline data from July 2, 2012 reflects this geographical change.

Safely Decrease the Number of State Wards

Strengths/Opportunities:

NSA continues to have fewer wards per 1,000 than what is expected compared to the national average of 5.2/1,000.

Barriers:

Action Items:

Completed:

- 40 Day Focus Initiatives
  - A.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
  - B.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

Planned:

CQI Team Priority:

* Statewide

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children and Family Will Have Timely Access to the Services and Support They Need

OOH Wards Currently and with 5.2/1,000 Population

Department of Health & Human Services
DHHS
NEBRASKA

Region	Current Wards	5.2/K Wards
SESA	853	548
ESA	1493	1007
Northern	418	459
Central	356	302
Western	290	265
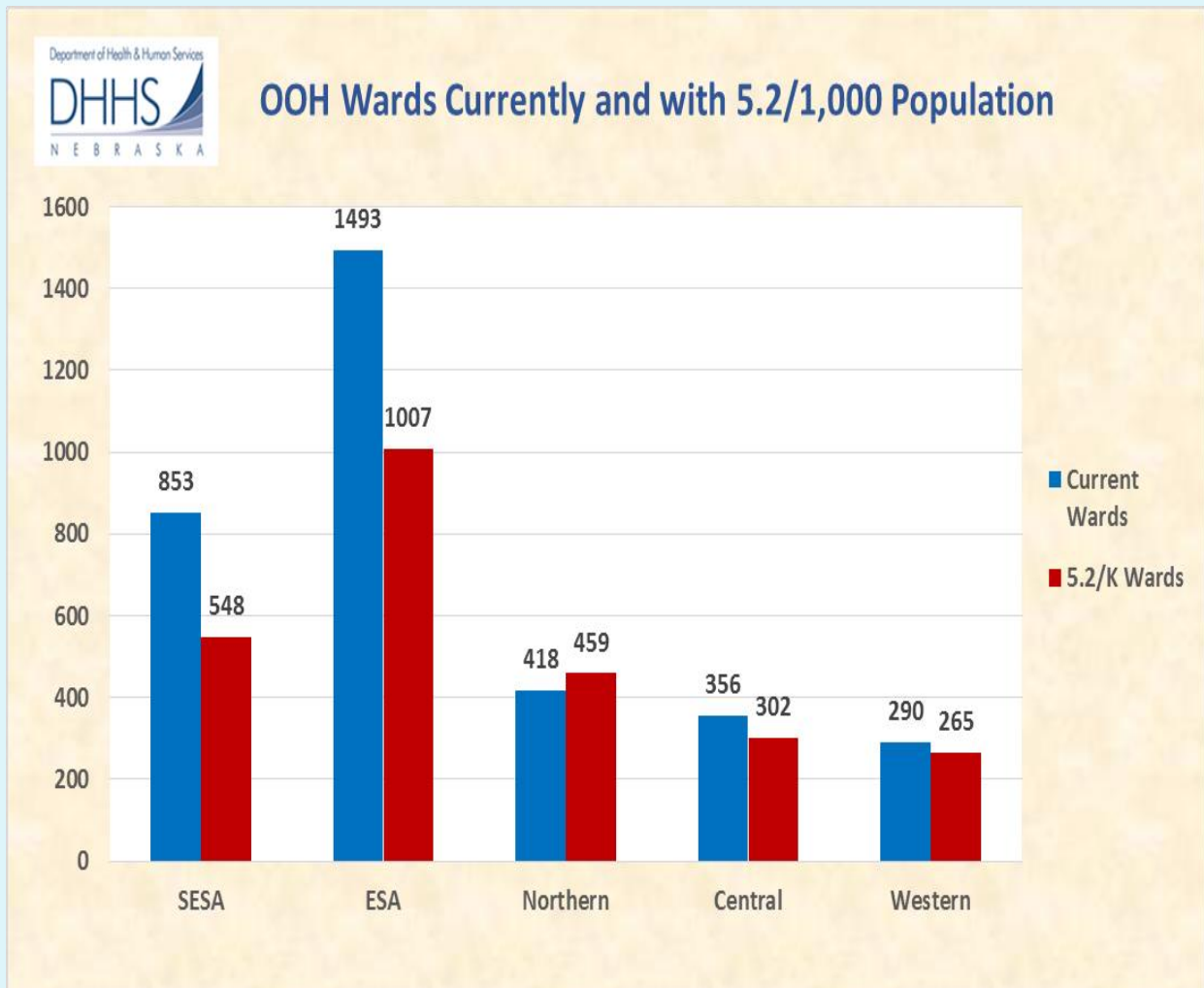
Data Source: Point in time report 2/24/14. Out of Home Court wards using 2012 Claritas youth population < 19 yrs. of age.

Note: Count by County Report is now available.

Safely Decrease the Number of State Wards

Strengths/Opportunities:

May 2014: Increase in number for ESA. NSA remained the same. Decrease in SESA, WSA and CSA.

Barriers:

Action Items:

Completed:

- 40 Day Focus Initiatives
    - A.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
    - B.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

Planned:

CQI Team Priority:

* Statewide

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children and Family Will Have Timely Access to the Services and Support They Need

OOH Wards per 1000 population by Service Area.
March 2012 - May 2014
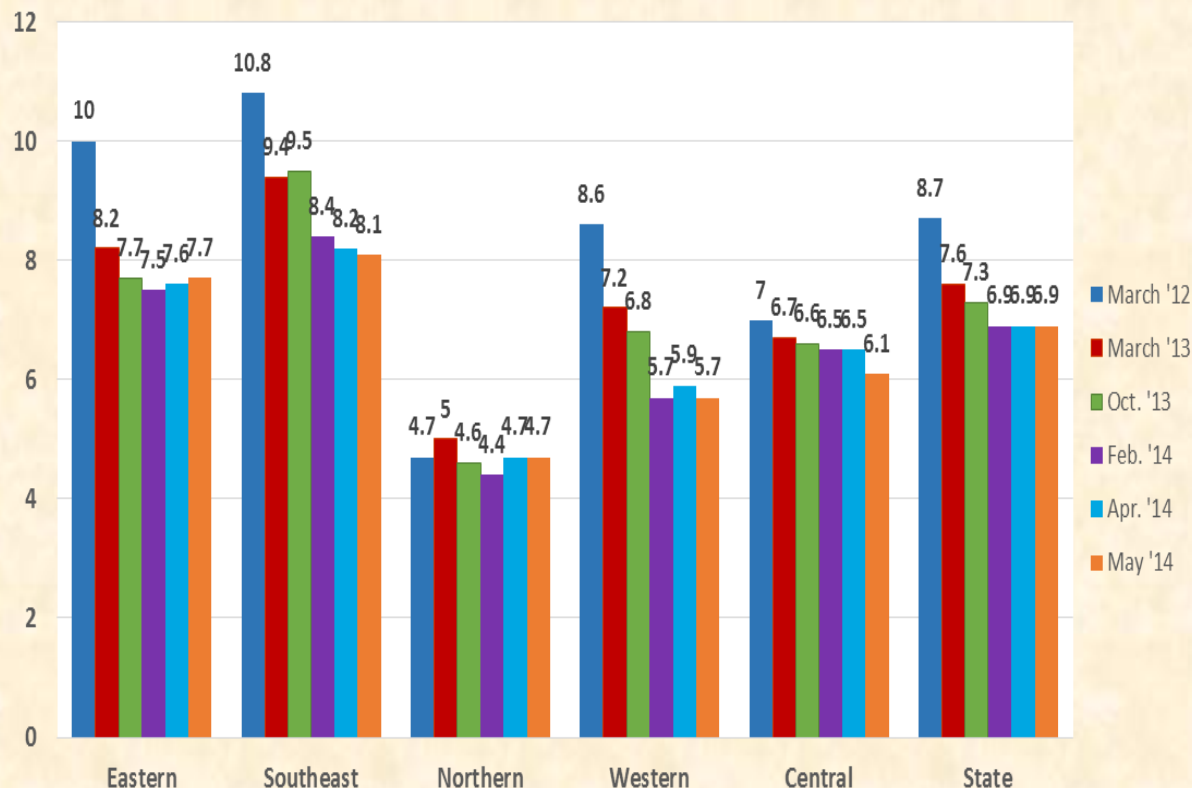
Data Source: Point in time report 3/18/2013. Out of Home Court wards using 2012 Claritas youth population < 19 yrs. of age.

Note: Count by County Report is now available.

Safely Decrease the Number of State Wards

Strengths/Opportunities:

Lower number of entries than exits.

LB-561 Became effective Oct 1, 2013. This results in youth being cared for by probation rather than CFS

Barriers:

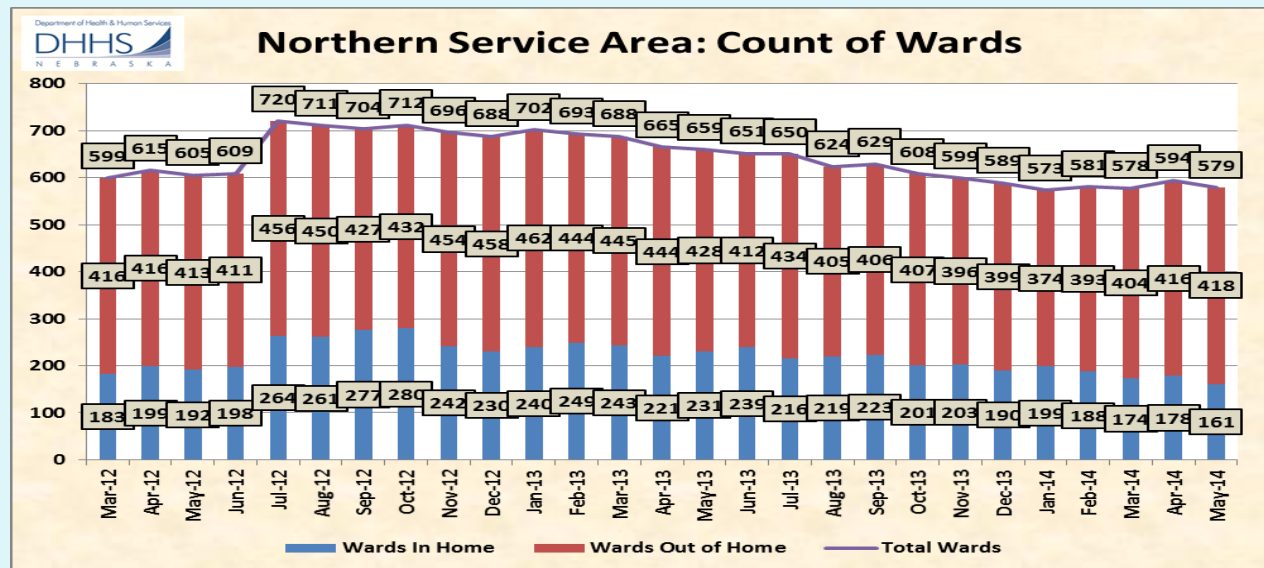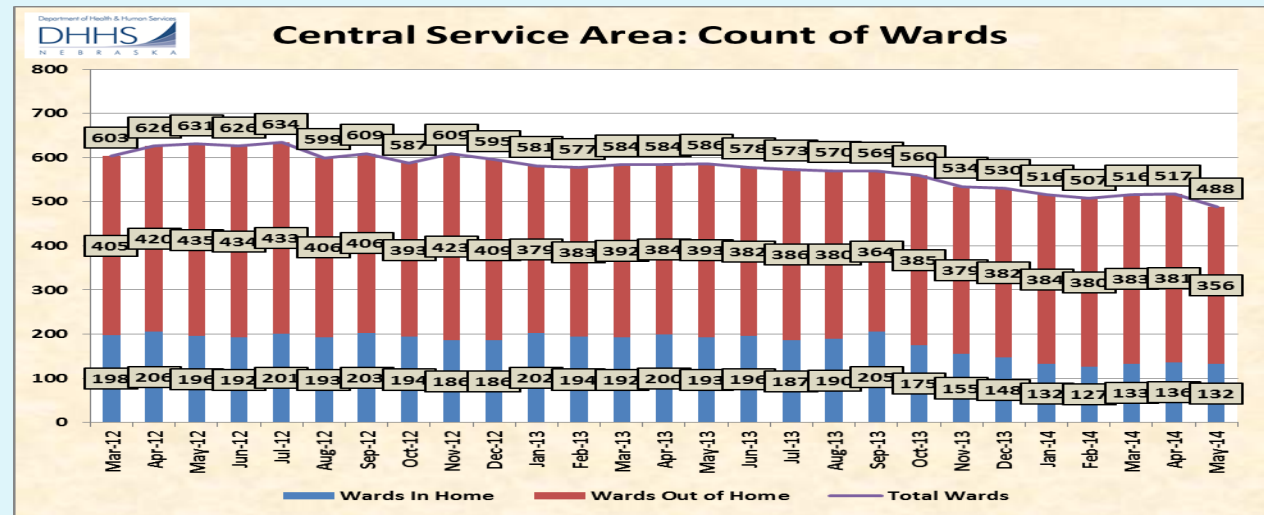**Action Items:**

Completed:

- 40 Day Focus Initiatives
    - A.) All wards living at home 60 days or more. 421 wards achieved permanency as a result of this initiative.
    - B.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
    - C.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

Planned:

CQI Team Priority:

* Statewide

Data Review Frequency: Quarterly

OUTCOME STATEMENT: Children and Family Will Have Timely Access to the Services and Support They Need

Point in Time State Ward Count with State Ward Entries and Exits
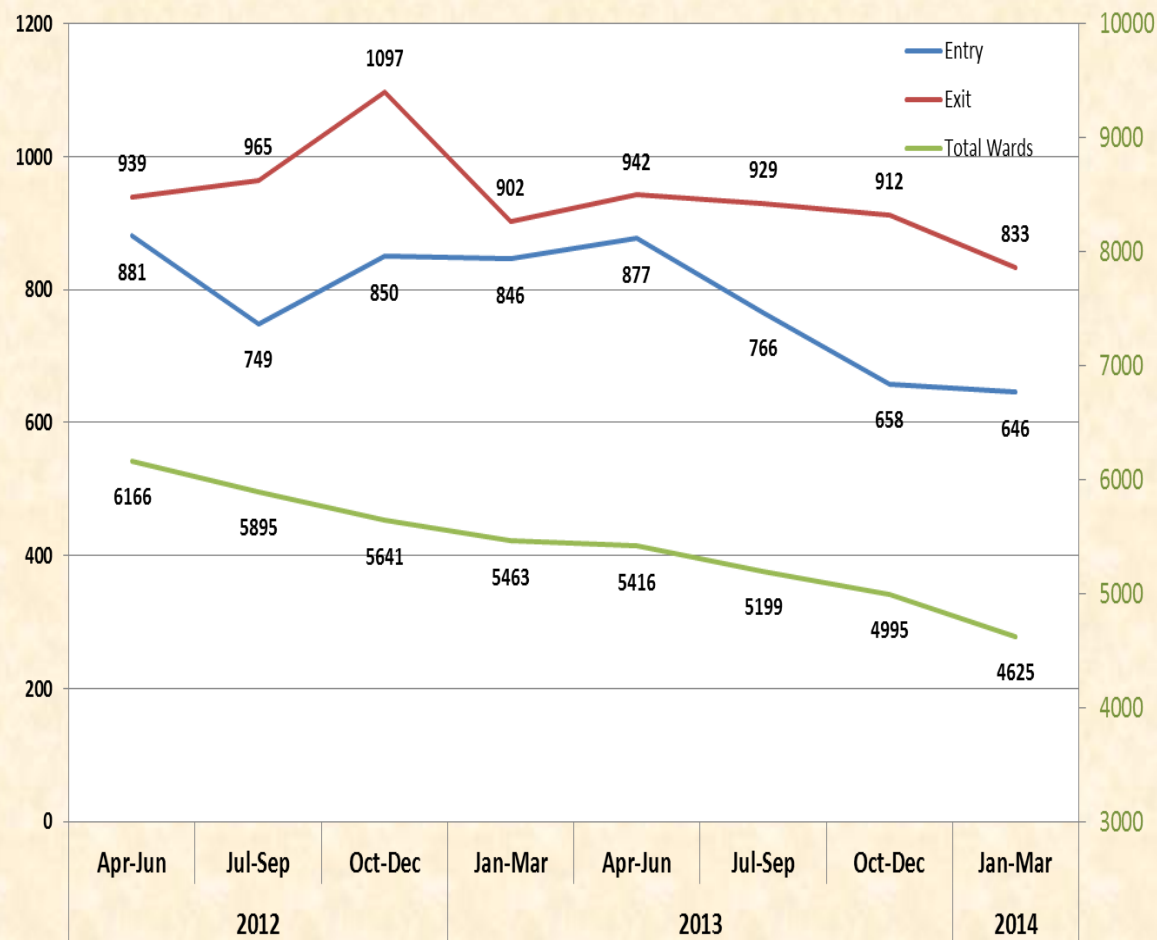
Safely Decrease the Number of State Wards

Strengths/Opportunities:
Entry numbers continue to be lower than exit numbers.

Barriers:
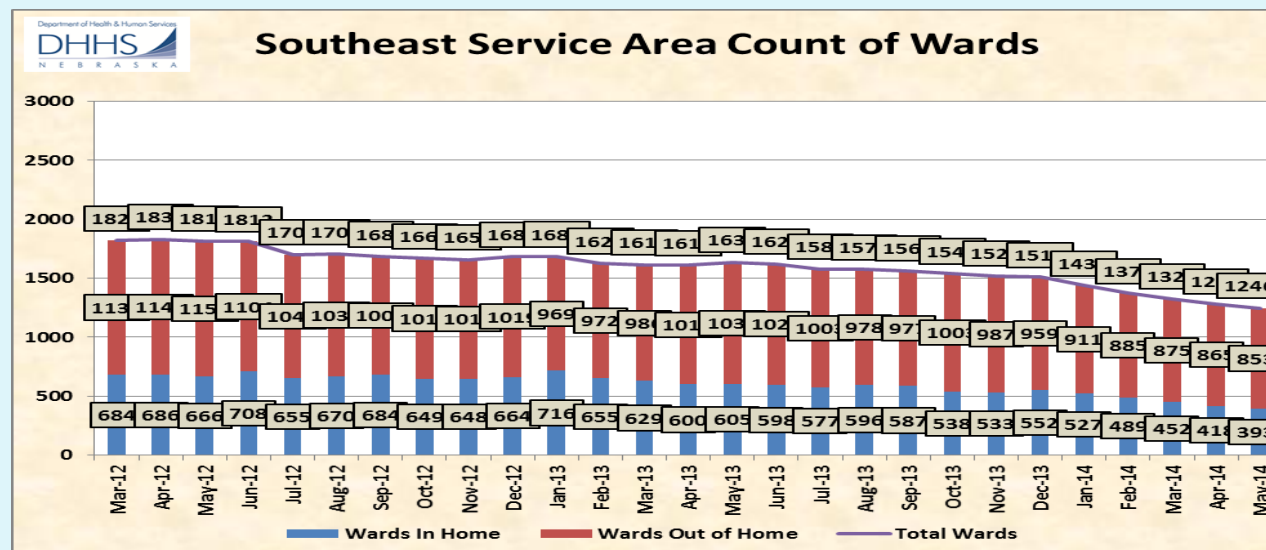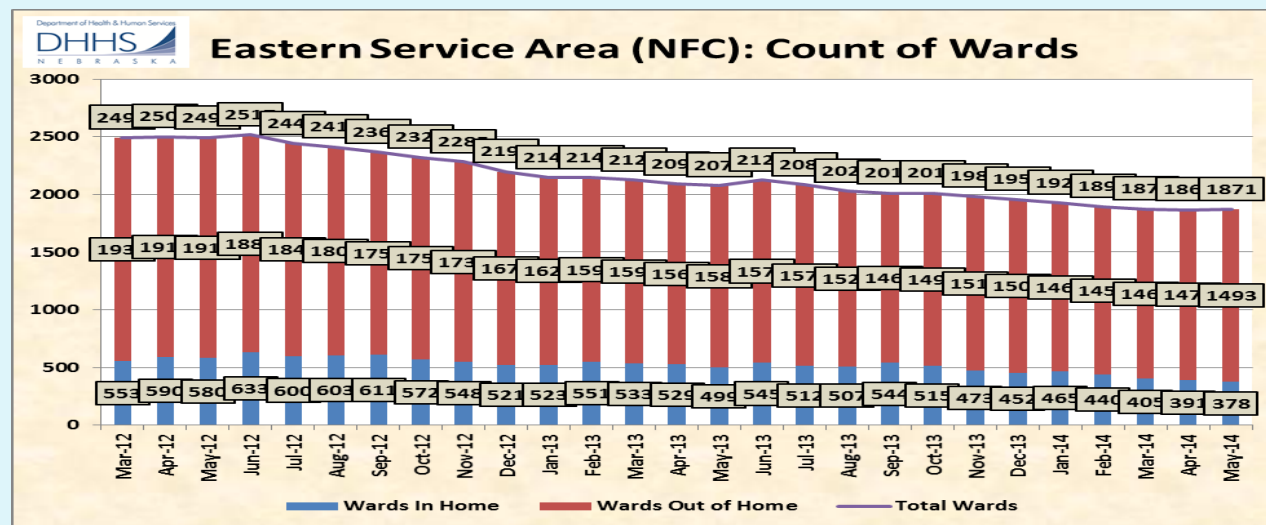
Action Items:

Completed:
- 40 Day Focus Initiatives
  - A.) All wards living at home 60 days or more. 421 wards achieved permanency as a result of this initiative.
  - B.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
  - C.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

Planned:

CQI Team Priority:
* Statewide

Data Review Frequency: Quarterly

OUTCOME STATEMENT: Children and Family Will Have Timely Access to the Services and Support They Need
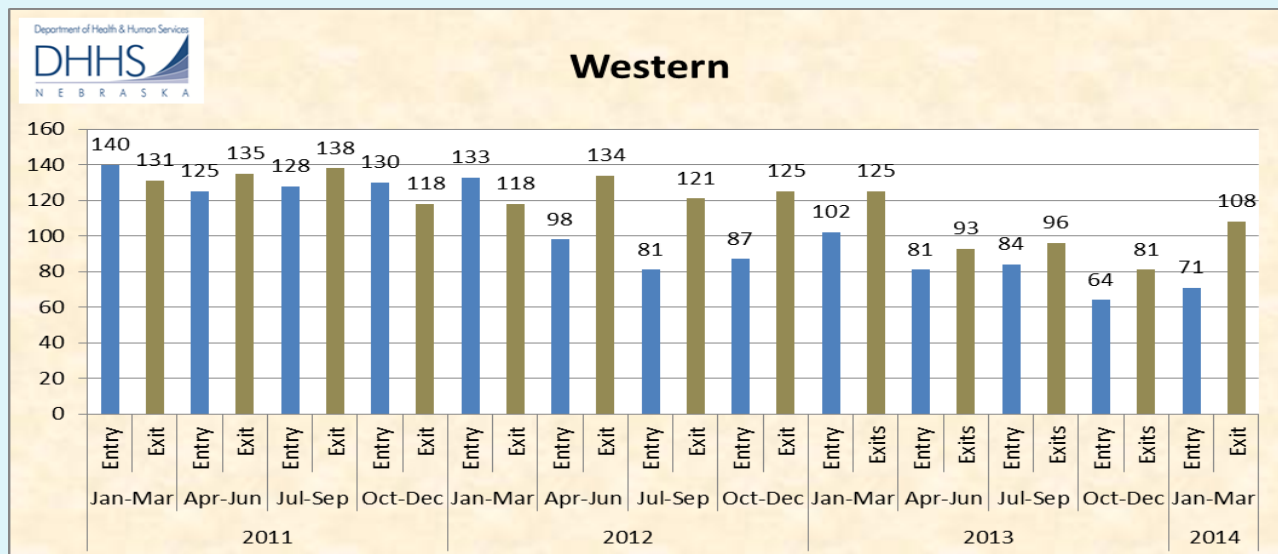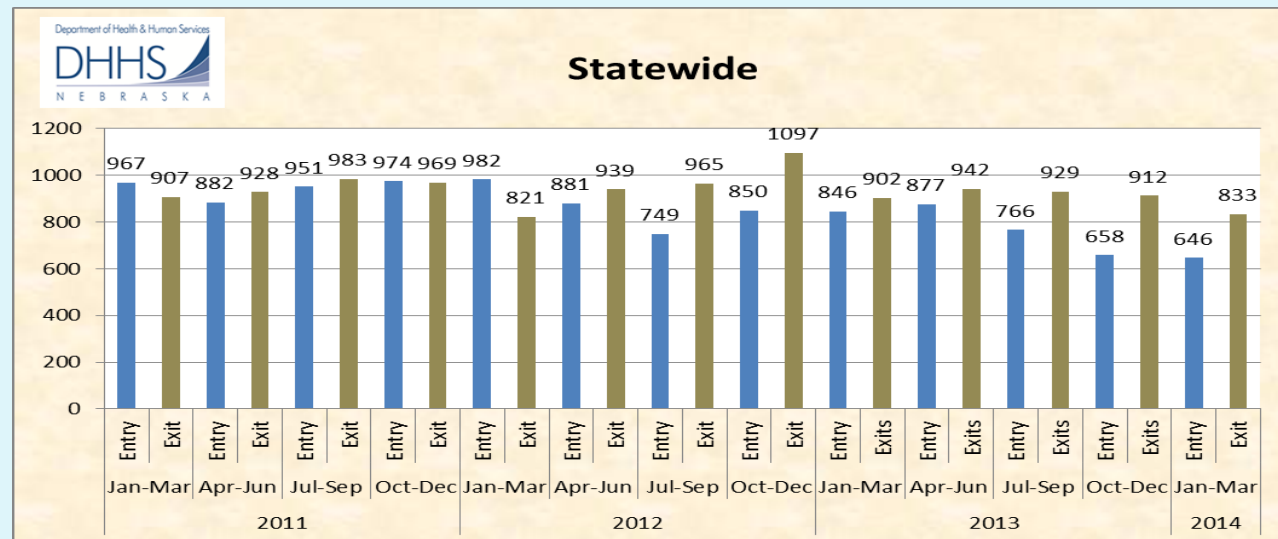
N-Focus Legal Status field. An entry occurs when a child is made a state ward. An exit occurs when the Legal Status changes to non-ward - not when it is entered into NFocus. Entries include youth that go from non-court to court. Counts based on date of action, not entry date into NFocus

Safely Decrease the Number of State Wards

OUTCOME STATEMENT: Children and Family Will Have Timely Access to the Services and Support They Need

Central
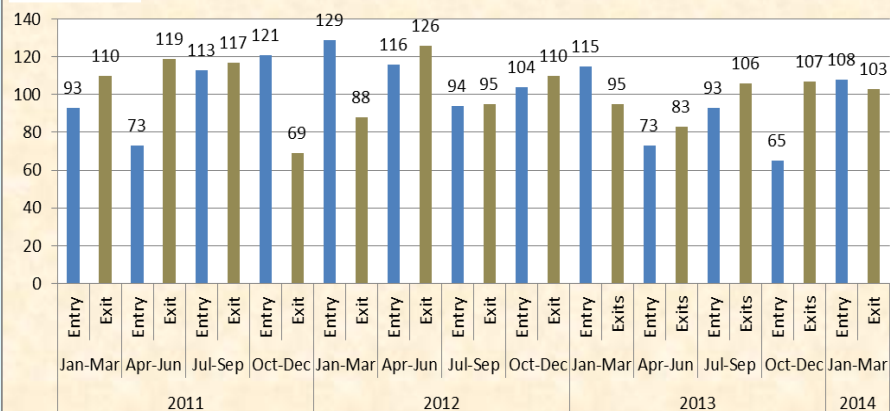
Eastern (NFC)
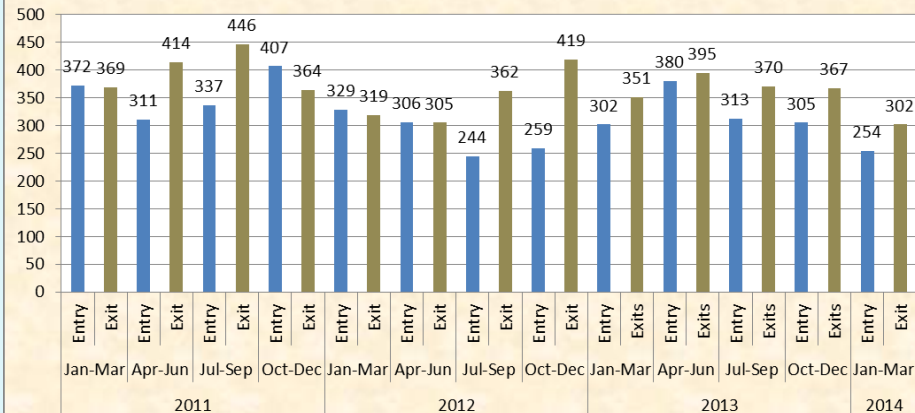
Northern
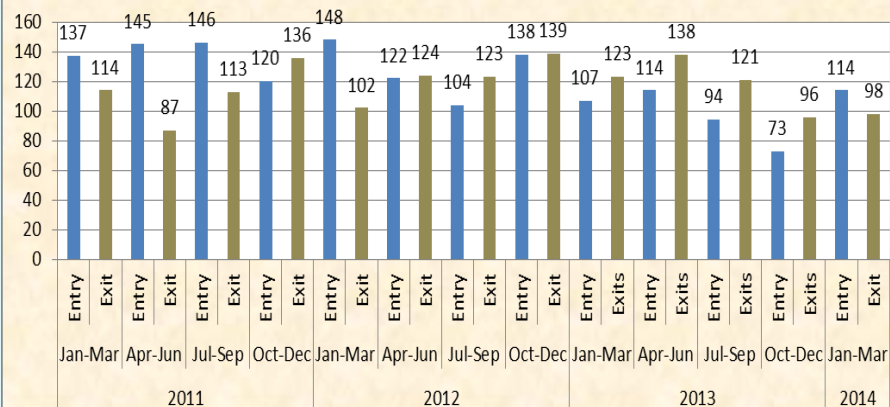
Southeast
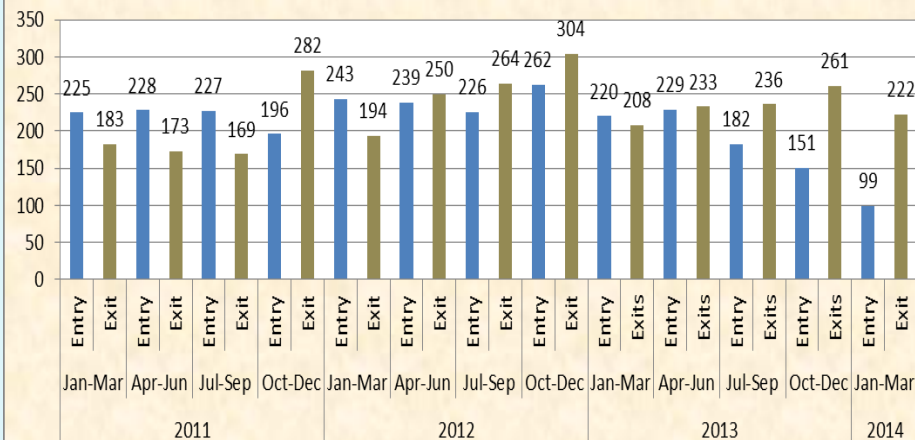
Safely Decrease the Number of State Wards

OUTCOME STATEMENT: Children and Family Will Have Timely Access to the Services and Support They Need

Regression Slope of Court Entries
Jan. 2012 - Mar. 2014

Region	Slope
State	-32.5
WSA	-5.8
ESA (NFC)	-0.7
SESA	-16
CSA	-4.5
NSA	-5.5
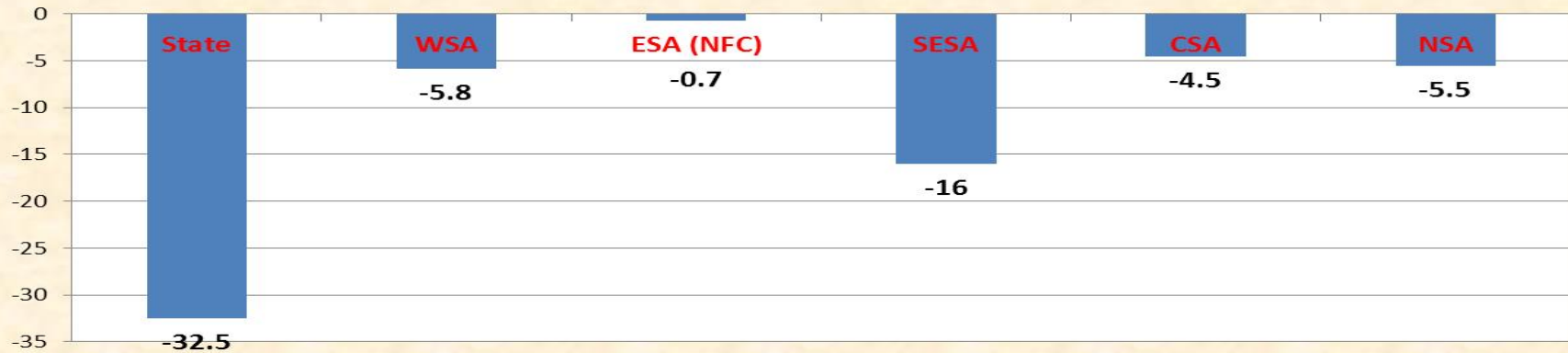
Regression Slope of Exits
Dec. 2012 - Mar. 2014

Region	Slope
State	-4.3
WSA	-4.7
ESA (NFC)	1.8
SESA	0.3
CSA	0
NSA	-1.75
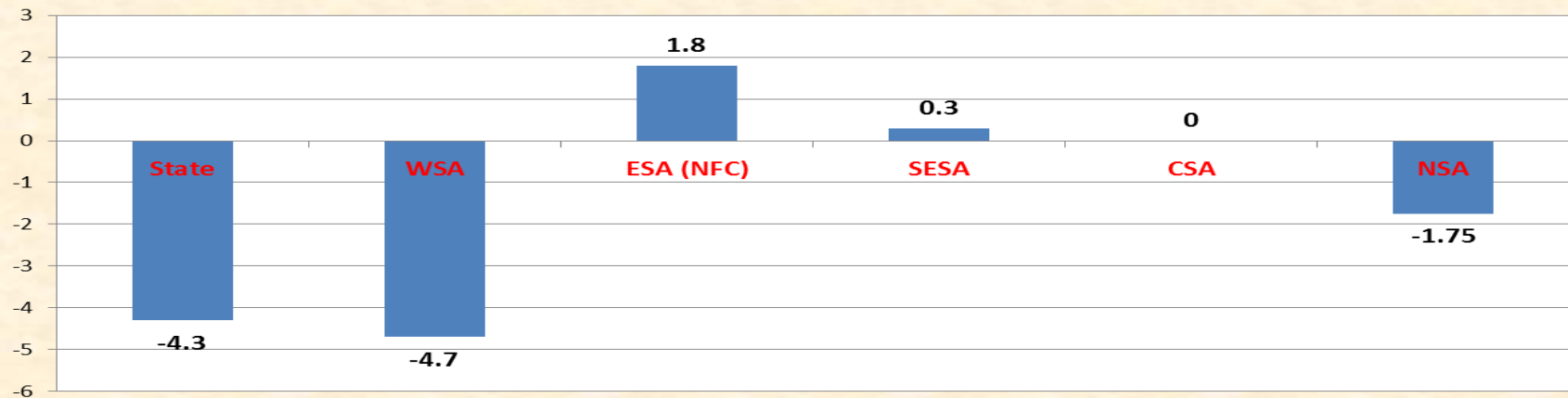
CHAPTER 2: SAFETY

OUTCOME STATEMENT: CHILDREN INVOLVED IN THE CHILD PROTECTION SYSTEM ARE SAFE

Goal Statement: CFS will have a timely response to reports of child abuse and neglect reports and conduct quality safety and risk assessments.

Intake Calls/Responses

Strengths/Opportunities:
April 2014: 89% of all calls to the hotline were answered within 18 seconds. 5% of the calls went to voicemail and were returned within 1 hour.

Barriers:

Action Items:
Completed:

Planned:
- Hotline Administrator will conduct training for stakeholders on how intake decisions are made.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

Hotline Calls Received & Percentage Answered by Month (2013 -2014)

Month	Calls	% Answered
Apr-13	7027	92%
May-13	6965	88%
Jun-13	5926	92%
Jul-13	6351	92%
Aug-13	7243	89%
Sep-13	7048	89%
Oct-13	7750	91%
Nov-13	7163	88%
Dec-13	6249	91%
Jan-14	7228	90%
Feb-14	6591	90%
Mar-14	6710	91%
Apr-14	7414	89%
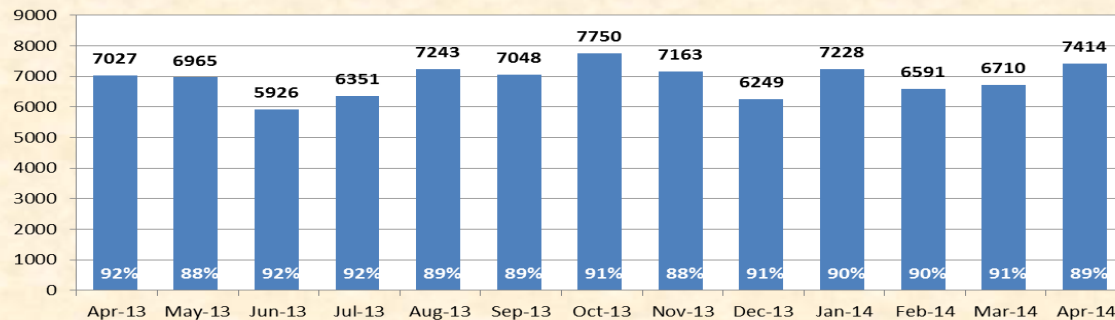
April 2014 Call Breakout
Total Calls = 7414

- Answered*, 89%
- Voicemail, 5%
- Abandoned, 6%
- Forceout, 1%
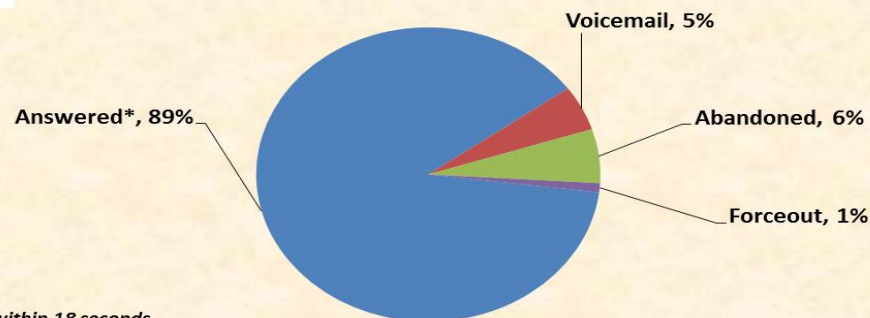
* Calls answered within 18 seconds

Definitions:
* Abandoned-call comes in and is not answered due to something in the ACD system which caused a reason for a disconnect or caller hung up.
* Forceout-call comes in and call was sent to worker and worker did not answer –(maybe due to…forgot to log off while faxing)
* Voicemail-calls unanswered that go to voicemail. The goal is to return the call within 1 hour. Case Aides track when the message came in and when the call is returned.

Intake Quality Measures

Strengths/Opportunities:

April 2014: Increase in 1 of the 4 quality measures this month. 100% achievement for CFSS taking action to address immediate safety concerns.

Barriers:

Action Items:

Completed:

- Intake QA Unit Reviews were implemented by CQI unit in July 2013. QA feedback is sent via email to the Hotline Supervisor and Worker. QA Results are discussed during Intake Monthly Meetings and System Team Calls and strategies are developed to address areas needing improvement.

Planned:

- A satisfaction Survey will be implemented in 2014.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

Number of Reviews:
*Jan 2014 = 199
*Feb 2014 = 200
*Mar 2014 = 99
*Apr 2014 = 158

This chart illustrates the percentage achieved for four measures that are part of the Intake QA Review. The Intake QA reviews are completed on a random sample of the total CPS and APS Intakes completed by hotline staff. The Intake QA reviews were implemented by the CQI Unit on July 1st, 2013. March 2014 there were no APS Reports reviewed.
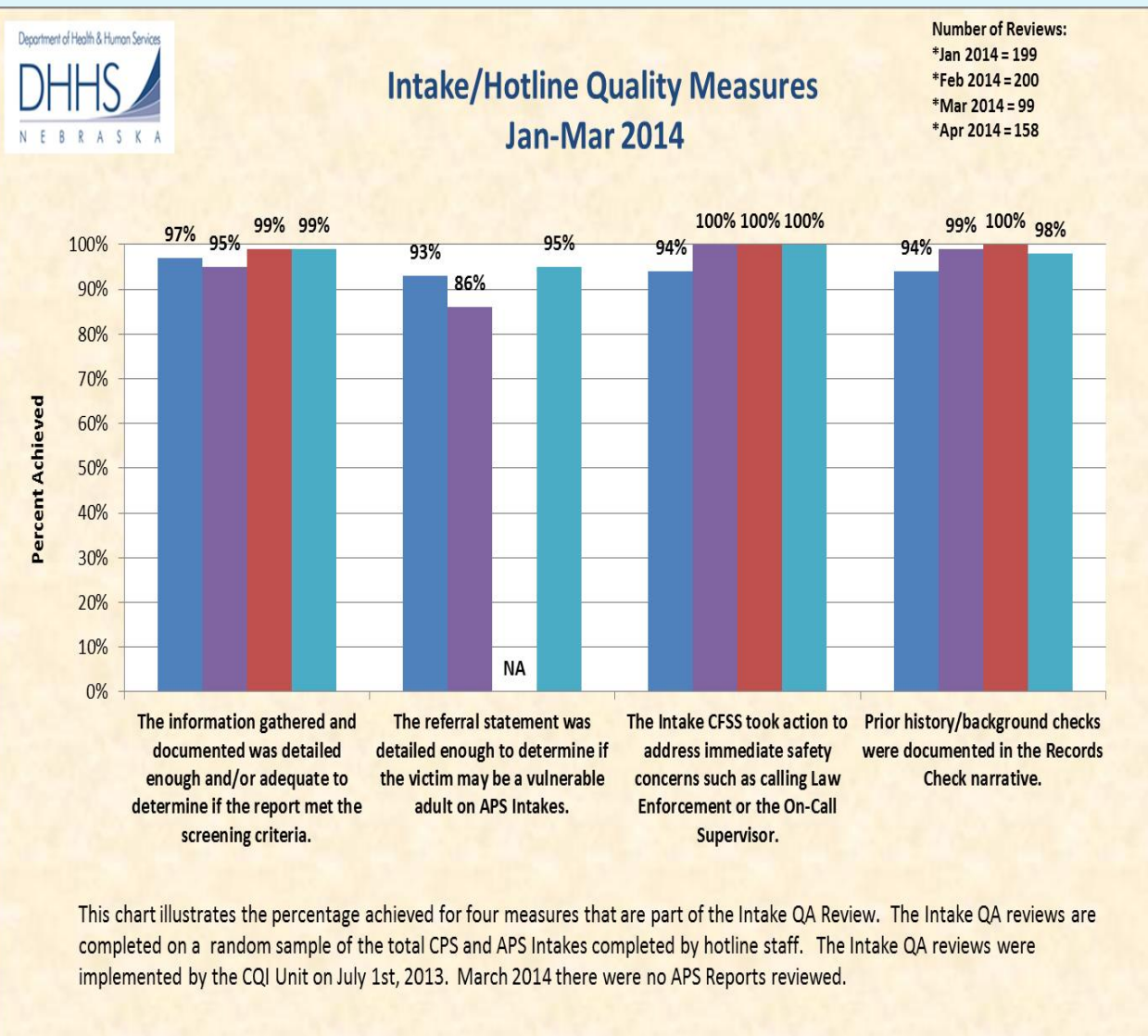
Absence of Maltreatment in Six Months

Strengths/Opportunities:

April 2014: **State performance continues to exceed the target goal.** All Service Areas are meeting the measure at this time.

Barriers:

-Duplicate Reports for the same incidents are creating instances of repeat maltreatment.

Action Items:

Completed:

-Policy changes were implemented in October 2012 to eliminate duplicate reports/substantiation of intakes that are received within 6 months for the same allegations.

-CQI team will complete additional breakdown of repeat maltreatment data to help the team identify areas needing improvement.

Planned:

- A workgroup will convene to look at reason for case involvement and put instructions together on how to document reason for case involvement to better capture information about substance abuse and other reasons for case opening/involvement.

CQI Team Priority:

*Statewide External Stakeholder Team
*Western and Southeast Service Areas

*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

Absence of Maltreatment Recurrence - COMPASS Measures
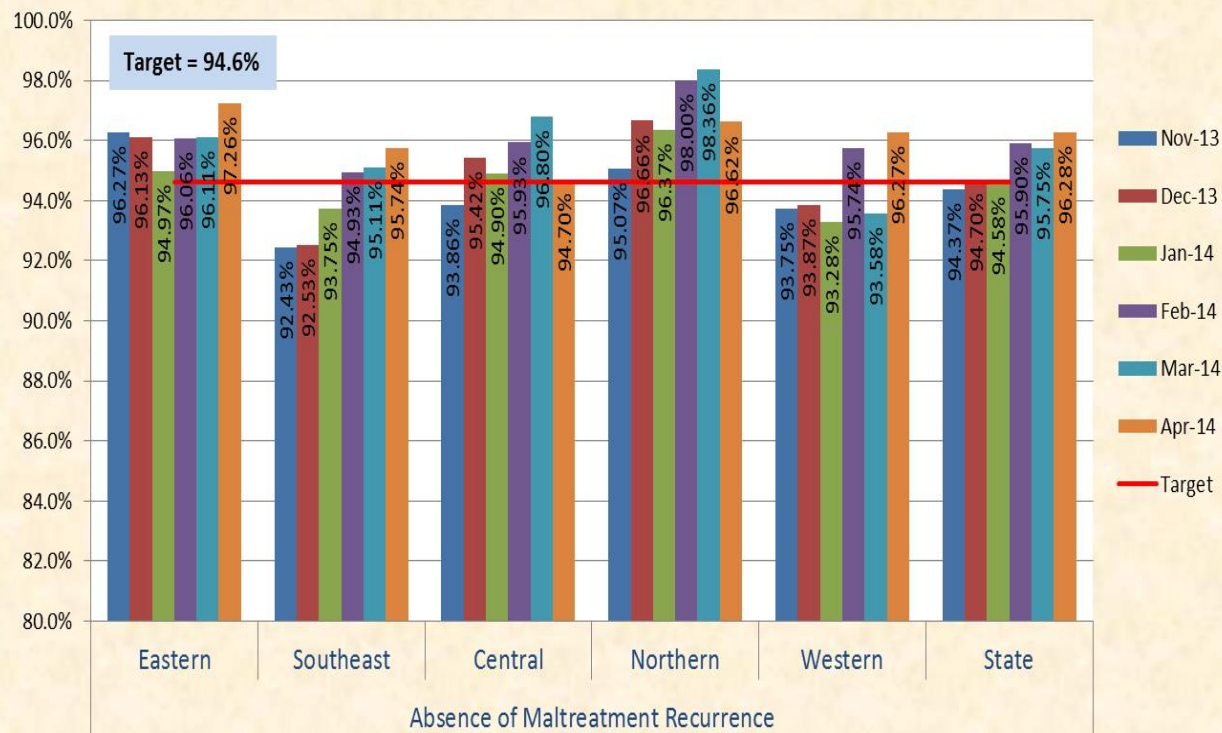
Target = 94.6%

Service Area	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14
Eastern	96.27%	96.13%	94.97%	96.06%	96.11%	97.26%
Southeast	92.43%	92.53%	93.75%	94.93%	95.11%	95.74%
Central	93.86%	95.42%	94.90%	95.93%	96.80%	94.70%
Northern	95.07%	96.66%	96.37%	98.00%	98.36%	96.62%
Western	93.75%	93.87%	93.28%	95.74%	93.58%	96.27%
State	94.37%	94.70%	94.58%	95.90%	95.75%	96.28%

Absence of Maltreatment Recurrence

This is Federal Measure that reports on a rolling 12 month period. Data Source: N-FOCUS COMPASS-State wards. The children included in this report were victims of abuse or neglect during the first six months of the 12 month period. If the child was a victim of a subsequent abuse or neglect incident within 6 months of the first incident of abuse or neglect they appear on this report. Victims are defined as children where the court or DHHS has substantiated the allegations of abuse or neglect.

Data Review Frequency: Quarterly (March, June, September, December)

IA – Investigation Timeframes

Strengths/Opportunities:
May 2014: Central Service Area continues to have the lowest number of Initial Assessments Not Finalized (32) that were due between Jan 2012 – May 2014 . Eastern Service Area has the highest number of assessments Not Finalized (268) during this same period. Sharp increase in number for ESA. **On 5/13/14 there were 812 Initial Assessments that were not finalized for the entire State for this same period.**

Action Items:
Completed:
- Direction was given to hotline staff to restart N-Focus at midnight in order to reset the clock used to calculate timeframes.
-4/30/13 Doug Beran emailed document to all CFS Admin/Supervisors providing guidance accessing the report to identify items not tied. Not tied includes instances where the ARP ID on Assessment does not match ARP ID on Intake.
-Reminders and Directions were given to IA staff regarding the following:
        * P1 time is based on 24 hours from the time the call was received by the hotline, so 8:00 am means we must respond by 8:00 am the following day.
        * When a meeting occurs prior to the hotline received date, the worker should either notify the hotline that the received date was in the past review the SDM report and set the received date to the proper date.
-Quick tip video instructions are now available with information on how to use weekly InfoView reports to identify intakes not tied etc.
-IA Case Management Due date report is now available and includes all IA related timeframes.
-Systems Team/S. Haber will made a decision regarding instances when a risk assessment should not be completed.

Planned:
-Systems Team/S. Haber will discuss and make a decision about IA completion timeframes.
CQI Team Priority:
• Statewide
• Western Service Area

Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

Initial Assessments - NOT FINALIZED (2012-2014)
* Initial Assessments that are not finalized past 30 days from the intake closure date.
as of **May 13, 2014**

Legend:
- 12/17/2013
- 01/14/2014
- 02/18/2014
- 03/18/2014
- 04/15/2014
- 05/13/2014

Y-axis: # of IA Not Finalized

	Central	Eastern	Northern	Southeast	Western	Tribal
12/17/2013	33	163	329	80	352	158
01/14/2014	22	134	279	44	345	166
02/18/2014	21	108	234	57	281	175
03/18/2014	29	132	238	51	275	168
04/15/2014	35	185	186	36	211	171
05/13/2014	32	268	121	70	138	183
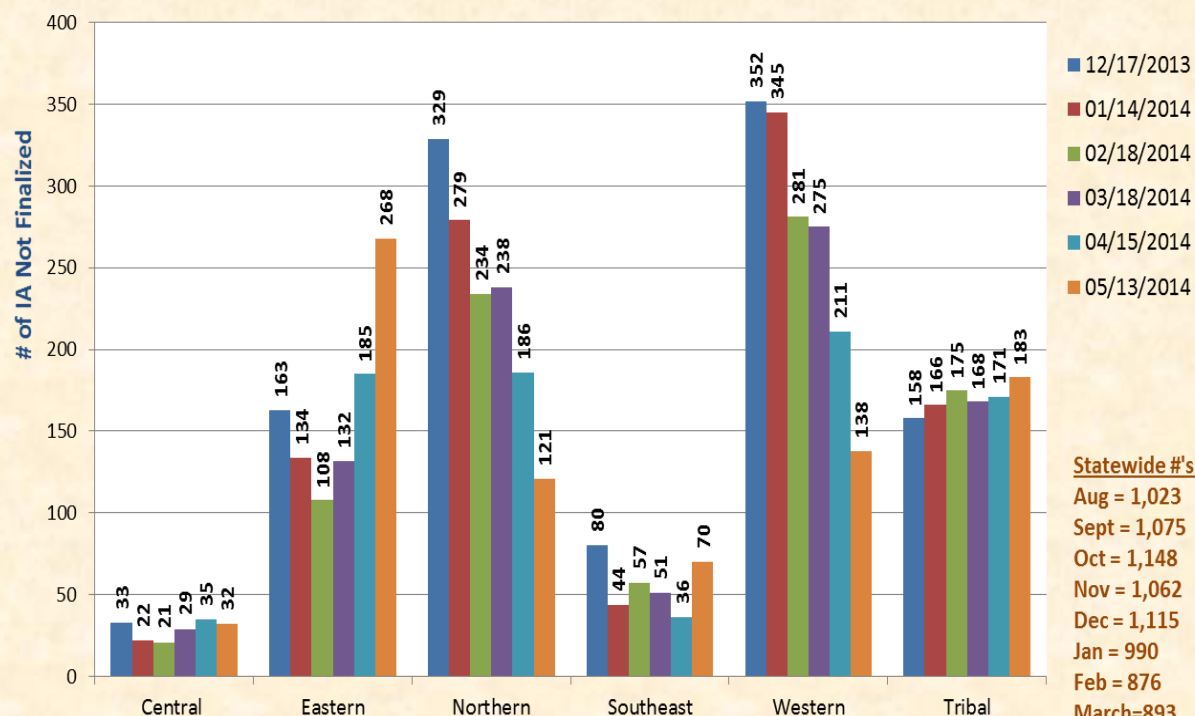
Statewide #'s:
Aug = 1,023
Sept = 1,075
Oct = 1,148
Nov = 1,062
Dec = 1,115
Jan = 990
Feb = 876
March=893
April=824
May = 812

This chart illustrates cases that are not finalized due to one or more of the following reasons: Safety assessment not tied to the intake, Risk assessment is not in fianl status, and/or Finding has not been entered.

IA – Contact Timeframes

Strengths/Opportunities:
April 2014: Decrease in P1 & P3 while increase in P2. The most common reason for missed contacts is due to No SDM Found.

Note: Intakes accepted for APSS or OH investigations were included in this measure for the first time in November 2013.

Barriers:
- Intakes not tied to Assessments
- ARP ID # errors

Action Items:

Completed:
- Direction was given to hotline staff to restart N-Focus at midnight in order to reset the clock used to calculate timeframes.
- 4/30/13 Doug Beran emailed document to all CFS Admin/Supervisors providing guidance accessing the report to identify items not tied. Not tied includes instances where the ARP ID on Assessment does not match ARP ID on Intake.
- Reminders and Directions were given to IA staff regarding the following:
    * P1 time is based on 24 hours from the time the call is closed by the hotline, so 8:00 am means we must respond by 8:00 am the following day.
    * When a meeting occurs prior to the hotline received date, the worker should either notify the hotline that the received date was in the past review the SDM report and set the received date to the proper date
* Quick Tip Captivate Video was produced with instructions on how to access reports on InfoView and specifically how to use weekly Intake and SDM Reports.

Planned:

- **CQI Team Priority:**
• Statewide
• Western Service Area

Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

Initial Assessment - Contacts made according to Priority Timeframes Statewide

Data excludes Refusals, Unable to Locate, and Law Enforcement Holds

	P1 (Contact Within 24 Hours)	P2 (Contact Within 5 Days)	P3 (Contact Within 10 Days)
Nov-13	88.8%	93.9%	96.4%
Dec-13	97.3%	94.8%	94.6%
Jan-14	92.9%	97.4%	96.1%
Feb-14	97.0%	95.5%	94.5%
Mar-14	96.3%	94.9%	98.2%
Apr-14	91.6%	95.9%	93.4%

April 2014: P1 (n=95); P2 (n=509); P3 (n=408)
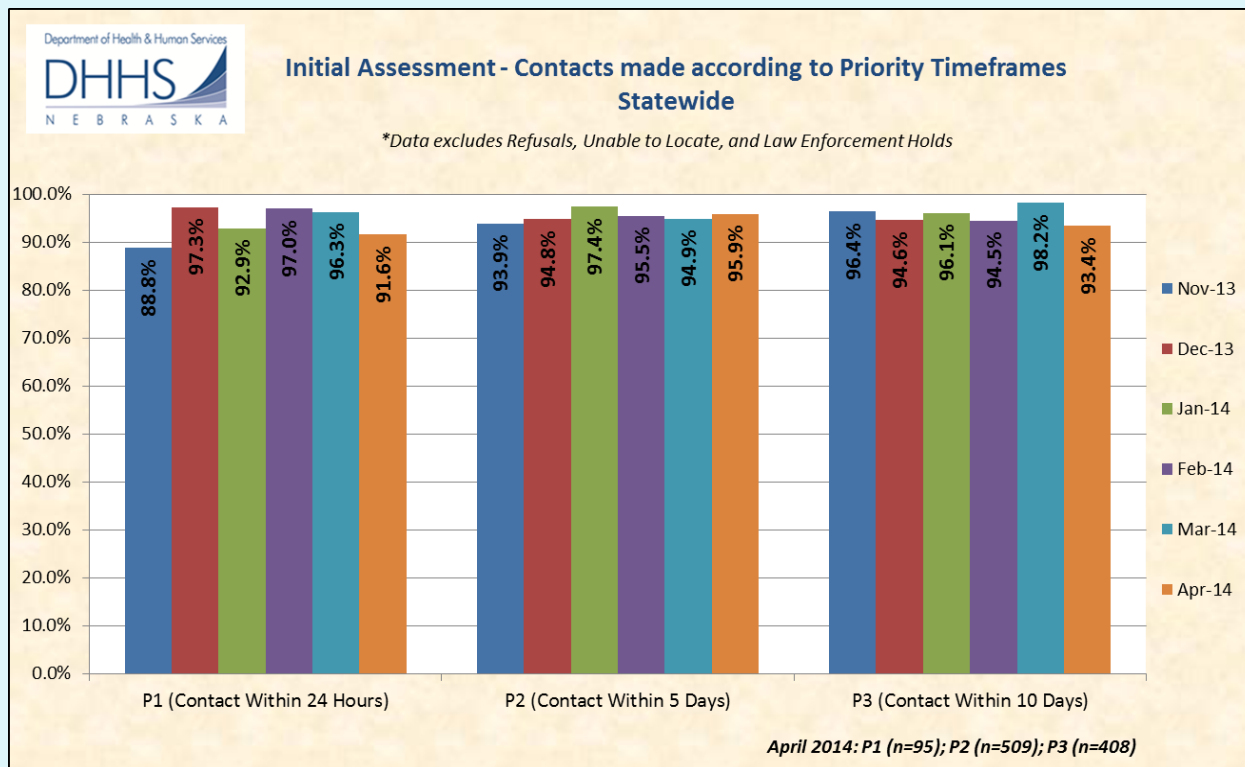
Count Missed by Admin

Tribal	19
Schiermeister	7
Bro	6
Zimmerman	4
Baker	4
Ullrich	3
Smith	2
Jelinek	2
Crankshaw	2
Spilde	1
Williams	1
Unknown Central	1
Duncan	1
Potterf	1
Runge	1
Steuter	1
Total	**56**

Reason for Missed Contacts

Not Tied - No SDM Found	32
Not Timely	9
Contact Date Prior Intake Date	2
No Victim in the Intake/Assessment	2
No Contact Documented	7
APSS- No Assessment	1
Accepted for OHA-No Assessment	1
Duplicate ARP	2
Total	**56**

Note: Intakes accepted for APSS or OH investigations were included in this measure for the first time in November 2013.

IA – Contact Timeframes

Strengths/Opportunities:

April 2014: ESA, SESA, NSA, CSA and WSA achieved 100% for P1 Contacts.

ESA and NSA have achieved 100% in P1 measure for 6 months in a row.

Barriers:

Action Items:

*Completed:

- New/Improved SDM Intake and Assessment Reports are now posted on InfoView. Reports identify assessments that are not tied to the intake, assessments with no findings entered etc. Instructions were emailed to CFS staff.

-IA Case management due date report is available and can be used daily to ensure timeframes are met.

-Quick Tip Videos are now available with instructions on how to access and use infoview reports to manage assessments.

*Planned:

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

Initial Assessment - Accepted P1 Intakes - Contact Made within 24 Hours

Region	Feb-14	Mar-14	Apr-14
Eastern	100%	100%	100%
Southeast	89%	100%	100%
Central	100%	85%	100%
Northern	100%	100%	100%
Western	100%	100%	100%
Tribal	50%	0%	11%

Initial Assessment - Accepted P2 Intakes - Contact Made within 5 Days

Region	Feb-14	Mar-14	Apr-14
Eastern	100%	99%	97%
Southeast	94%	92%	97%
Central	88%	93%	96%
Northern	100%	100%	99%
Western	96%	95%	98%
Tribal	0%	0%	0%

Initial Assessment - Accepted P3 Intakes - Contact Made within 10 Days

Region	Feb-14	Mar-14	Apr-14
Eastern	99%	100%	94%
Southeast	97%	100%	95%
Central	79%	91%	92%
Northern	100%	100%	94%
Western	96%	100%	97%
Tribal	0%	0%	0%

Absence of Maltreatment in Foster Care

Strengths/Opportunities:
April 2014: ESA is the only Service Area that is not meeting the target goal for this measure. Decrease in statewide performance to 99.65%

Barriers:
-Duplicate Reports for the same incidents are creating instances of repeat maltreatment.

Action Items:
Completed:
- Southeast Service Area Administrator and the Foster Care Review Office Director met and created a process to staff and address barriers for repeat maltreatment in foster care cases in Southeast Service Area.
- Policy changes were implemented in October 2012 to eliminate duplicate reports/substantiation of intakes that are received within 6 months for the same allegations
- ESA places a home on hold until the investigation is complete when the intake is not accepted.
-CQI complete additional breakdown of repeat maltreatment data to help the team identify areas needing improvement.

Planned:
- A workgroup will convene to look at reason for case involvement and put instructions together on how to document reason for case involvement to better capture information about substance abuse and other reasons for case opening/involvement.

CQI Team Priority:
*Statewide External Stakeholder Team

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

Absence of Maltreatment in Foster Care - COMPASS Measures
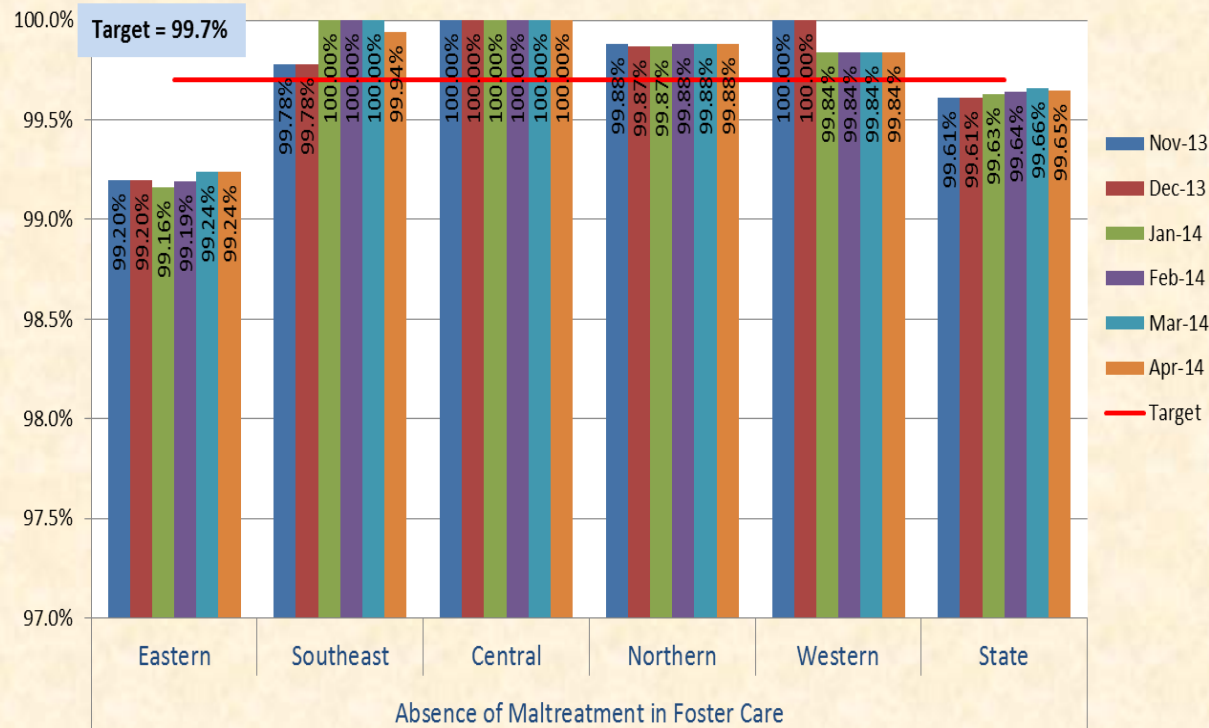
Target = 99.7%

	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14
Eastern	99.20%	99.20%	99.16%	99.19%	99.24%	99.24%
Southeast	99.78%	99.78%	100.00%	100.00%	100.00%	99.94%
Central	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Northern	99.88%	99.87%	99.87%	99.88%	99.88%	99.88%
Western	100.00%	100.00%	99.84%	99.84%	99.84%	99.84%
State	99.61%	99.61%	99.63%	99.64%	99.66%	99.65%

Absence of Maltreatment in Foster Care

This is a Federal Measure that reports on a rolling 12 month period. Data Source: N-FOCUS COMPASS-State wards. This measure is of all children who are placed outside of their parental home either in a foster home or group care, the percent that were not abused or neglected by either a foster parent or a facility staff member.

Data Review Frequency: Quarterly (March, June, September, December)

APSS Data

Strengths/Opportunities:

May 2014: There were 139 APSS finalized statewide. 25% had a determination of conditionally suitable or unsuitable.

Barriers:

.

Action Items:

*Completed:

- New/Improved SDM Intake and Assessment Reports are now posted on InfoView. Reports identify assessments that are not tied to the intake, assessments with no findings entered etc. Instructions were emailed to CFS staff.

-IA Case management due date report is available and can be used daily to ensure timeframes are met.

-Quick Tip Videos are now available with instructions on how to access and use Infoview reports to manage assessments.
-APSS trainings implemented throughout the State.

*Planned:

-Sherri Haber will lead a workgroup to address procedures for non accepted intakes to include guidance on whether or not to put a hold on the foster home when an intake is not accepted.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

CY 2014 Finalized Assessment of Placement Safety and Suitability (APSS)

Data as of 05/12/14

Legend: Suitable, Conditionally Suitable, Unsuitable

- Central (n=7): Suitable 86%, Conditionally Suitable 14%, Unsuitable 0%
- Eastern (n=102): Suitable 72%, Conditionally Suitable 13%, Unsuitable 16%
- Northern (n=4): Suitable 75%, Conditionally Suitable 25%, Unsuitable 0%
- Southeast (n=16): Suitable 94%, Conditionally Suitable 6%, Unsuitable 0%
- Western (n=10): Suitable 70%, Conditionally Suitable 0%, Unsuitable 30%
- State (n=139): Suitable 75%, Conditionally Suitable 12%, Unsuitable 14%

The SDM Assessment of Placement Safety and Suitability (APSS) is a tools that is used to assess safety and care concerns for children placed in approved and licensed foster homes. When the intake on the foster home is accepted, the APSS is completed by an IA CFS Specialist, when it is not accepted (e.g. does not meet definition), it is completed by the ongoing CFS Specialist (in ESA, the FPS).

Definitions:
Suitable – Based on the information available (at this time), there are no child concerns in this placement.
Conditionally Suitable – Based on interventions, the child will remain in the household at this time. An intervention plan is required.
Unsuitable – Removal from the household is the only protective intervention possible for one or more children. Without removal, one or more children will likely be in danger of serious harm or in an unsuitable care arrangement

APSS Data

Strengths/Opportunities:

May 2014: There were 139 APSS finalized statewide. 25% had a determination of conditionally suitable or unsuitable.

Barriers:

.

Action Items:

Completed:

- New/Improved SDM Intake and Assessment Reports are now posted on InfoView. Reports identify assessments that are not tied to the intake, assessments with no findings entered etc. Instructions were emailed to CFS staff.

-IA Case management due date report is available and can be used daily to ensure timeframes are met.

-Quick Tip Videos are now available with instructions on how to access and use Infoview reports to manage assessments.

-APSS trainings implemented throughout the State.

Planned:

-Sherri Haber will lead a workgroup to address procedures for non accepted intakes to include guidance on whether or not to put a hold on the foster home when an intake is not accepted.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

CY 2014 Finalized Assessment of Placement Safety and Suitability (APSS) — Data as of 05/12/14

Legend: Suitable, Conditionally Suitable, Unsuitable

- Kinship/Approved (n=10): 70%, 0%, 30%
- Foster Care (n=92): 77%, 12%, 11%
- Relative Home (n=36): 69%, 14%, 17%

CY 2014 Finalized Assessment of Placement Safety and Suitability (APSS) — Data as of 05/12/2014

	KC CSA	FC CSA	RH CSA	KC ESA	FC ESA	RH ESA	FC NSA	RH NSA	KC SESA	FC SESA	RH SESA	FC WSA	RH WSA
Suitable	1	3	2	4	53	16	1	2	2	9	4	5	1
Conditionally Suitable	0	1	0	0	10	3	0	1	0	0	1	0	0
Unsuitable	0	0	0	3	9	4	0	0	0	0	0	1	2

The SDM Assessment of Placement Safety and Suitability (APSS) is a tool that is used to assess safety and care concerns for children placed in approved and licensed foster homes. When the intake on the foster home is accepted, the APSS is completed by an IA CFS Specialist, when it is not accepted (e.g. does not meet definition), it is completed by the ongoing CFS Specialist (in ESA, the FPS).

Definitions:
Suitable – Based on the information available (at this time), there are no child concerns in this placement.
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Unsuitable – Removal from the household is the only protective intervention possible for one or more children. Without removal, one or more children will likely be in danger of serious harm or in an unsuitable care arrangement

CHAPTER 2: SAFETY CONT.

SDM – Structured Decision Making EBP

SDM Risk Re & Reunification Assessments

Strengths/Opportunities:

# of All Youth with No Finalized Risk-Re or Reunification Assessments			
	Mar	**Apr**	**May**
State	186	99	69
CSA	30	8	1
ESA	56	34	20
NSA	46	24	14
SESA	31	22	20
WSA	23	11	14

Barriers:

Action Items:

Completed:

-10 Week SDM Refresher Trainings were implemented statewide.

-Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors

-Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff etc.)

- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

Planned:

--Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.

-Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

CQI Team Priority:

* ALL Service Areas

Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

Distribution of Youth in Care > 150 Days with a Finalized Risk Reassessment or Reunification Assessment

- Within the Last 90 Days
- More Than 90 Days
- No Assessment

Excludes OJS Wards, tribal youth and youth with a Permanency Objective of Adoption, Guardianship, Independent Living and Self Sufficiency

Central n=194
Eastern n=1122
Northern n=294
Southeast n=716
Western n=159
State n=2485

as of 4/14/14

Distribution of Youth in Care > 150 Days with a Finalized Risk Reassessment or Reunification Assessment

- Within the Last 90 Days
- More Than 90 Days
- No Assessment

Excludes OJS Wards, tribal youth and youth with a Permanency Objective of Adoption, Guardianship, Independent Living and Self Sufficiency

Central n=194
Eastern n=1168
Northern n=298
Southeast n=682
Western n=153
State n=2495

as of 5/19/14

SDM Risk Re & Reunification Assessments

Strengths/Opportunities:

# of State Wards with No Finalized Risk-Re or Reunification Assessments			
	Mar	**Apr**	**May**
State	133	83	50
CSA	23	8	1
ESA	44	30	15
NSA	32	19	8
SESA	18	15	14
WSA	16	11	12

Barriers:

Action Items:

Completed:

-10 Week SDM Refresher Trainings were implemented statewide.

-Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors

-Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff etc.)

- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

Planned:

-Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.

-Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

CQI Team Priority:

* ALL Service Areas

Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

Distribution of State Wards in Care > 150 Days with a Finalized Risk Reassessment or Reunification Assessment

Within the Last 90 Days; More Than 90 Days; No Assessment

Central: 61%, 34%, 4%
Eastern: 71%, 26%, 3%
Northern: 58%, 35%, 8%
Southeast: 74%, 23%, 2%
Western: 60%, 31%, 9%
State: 69%, 27%, 4%

Excludes OJS Wards, tribal youth and youth with a Permanency Objective of Adoption, Guardianship, Independent Living and Self Sufficiency

Central n=189
Eastern n=970
Northern n=248
Southeast n=652
Western n=126
State n=2185

as of 4/14/14

Distribution of State Wards in Care > 150 Days with a Finalized Risk Reassessment or Reunification Assessment

Within the Last 90 Days; More Than 90 Days; No Assessment

Central: 83%, 17%, 1%
Eastern: 70%, 29%, 1%
Northern: 58%, 39%, 3%
Southeast: 73%, 24%, 2%
Western: 52%, 39%, 9%
State: 69%, 28%, 2%

Excludes OJS Wards, tribal youth and youth with a Permanency Objective of Adoption, Guardianship, Independent Living and Self Sufficiency

Central n=185
Eastern n=1006
Northern n=236
Southeast n=625
Western n=132
State n=2184

as of 5/19/14

SDM Risk Re & Reunification Assessments

Strengths/Opportunities:

# of Non-Court Youth with No Finalized Risk-Re or Reunification Assessments			
	Mar	**Apr**	**May**
State	53	16	19
CSA	7	0	0
ESA	12	4	5
NSA	14	5	6
SESA	13	7	6
WSA	7	0	2

Barriers:

Action Items:

Completed:

-10 Week SDM Refresher Trainings were implemented statewide.

-Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors

-Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff etc.)

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Planned:

-Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.

-Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

CQI Team Priority:

* ALL Service Areas

Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

Distribution of Non- Court Children in Care> 150 Days with a Finalized Risk Reassessment or Reunification Assessment

Legend: Within the Last 90 Days / More Than 90 Days / No Assessment

Central: 60%, 40%, 0%
Eastern: 65%, 32%, 3%
Northern: 76%, 13%, 11%
Southeast: 72%, 17%, 11%
Western: 76%, 24%, 0%
State: 69%, 25%, 5%

Excludes OJS Wards, tribal youth and youth with a Permanency Objective of Adoption, Guardianship, Independent Living and Self Sufficiency

Central n=5
Eastern n=152
Northern n=46
Southeast n=64
Western n=33
State n=300

as of 4/14/14

Distribution of Non- Court Children in Care> 150 Days with a Finalized Risk Reassessment or Reunification Assessment

Legend: Within the Last 90 Days / More Than 90 Days / No Assessment

Central: 100, 0%, 0%
Eastern: 75%, 22%, 3%
Northern: 81%, 10%, 10%
Southeast: 75%, 14%, 11%
Western: 86%, 5%, 10%
State: 78%, 16%, 6%

Excludes OJS Wards, tribal youth and youth with a Permanency Objective of Adoption, Guardianship, Independent Living and Self Sufficiency

Central n=9
Eastern n=162
Northern n=62
Southeast n=57
Western n=21
State n=311

as of 5/19/14

SDM Family Strengths and Needs Assessment (FSNA)

Strengths/Opportunities:

# of ALL Youth with No Finalized FSNA			
	Mar	**Apr**	**May**
State	51	45	19
CSA	5	4	1
ESA	18	10	5
NSA	15	17	3
SESA	6	4	3
WSA	7	10	7

Barriers:

Action Items:

Completed:

-10 Week SDM Refresher Trainings were implemented statewide.

-Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors

-Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff, etc.)

- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

Planned:

-Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.

-Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.
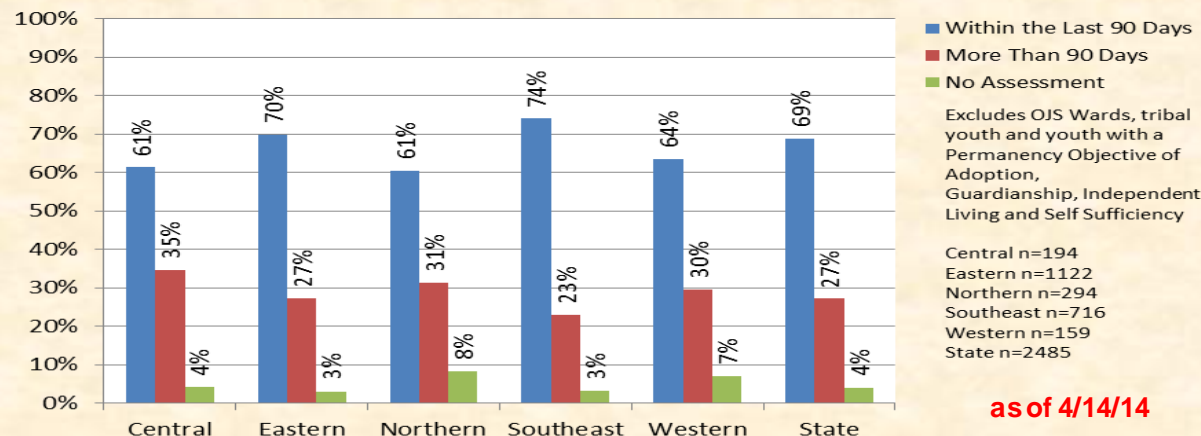
CQI Team Priority:

* ALL Service Areas

Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.
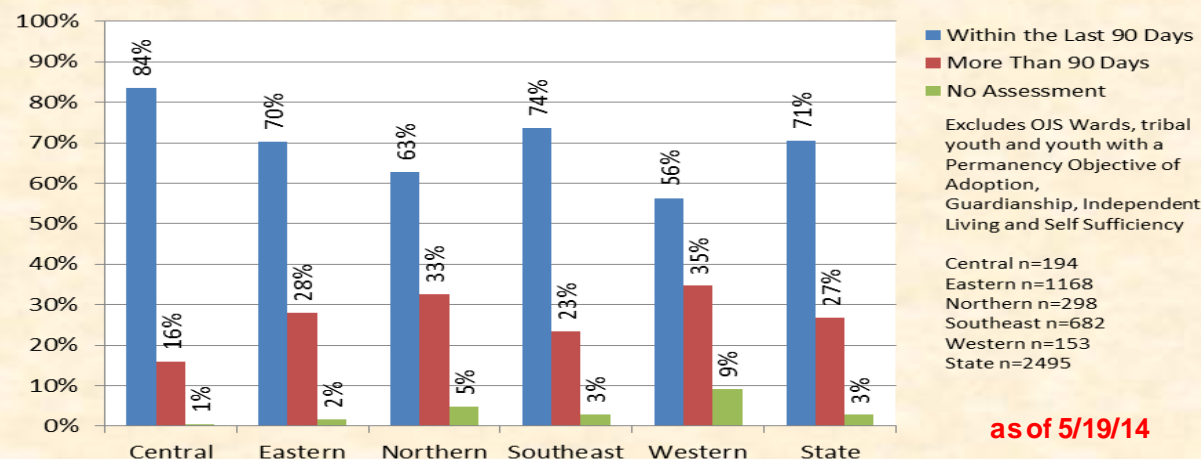
Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

Distribution of Youth in Care > 120 Days with a Finalized FSNA

Legend: Within the Last 90 Days / More Than 90 Days / No FSNA

Excludes tribal youth

Central n=396
Eastern n=1766
Northern n=528
Southeast n=1228
Western n=318
State n=4236

as of 4/14/14

	Within Last 90 Days	More Than 90 Days	No FSNA
Central	75%	24%	1%
Eastern	83%	17%	1%
Northern	68%	29%	3%
Southeast	83%	16%	0%
Western	69%	28%	3%
State	79%	20%	1%

Distribution of Youth in Care > 120 Days with a Finalized FSNA

Legend: Within the Last 90 Days / More Than 90 Days / No FSNA

Excludes tribal youth

Central n=396
Eastern n=1769
Northern n=495
Southeast n=1171
Western n=303
State n=4104

as of 5/19/14

	Within Last 90 Days	More Than 90 Days	No FSNA
Central	88%	11%	0%
Eastern	79%	20%	0%
Northern	75%	25%	1%
Southeast	79%	21%	0%
Western	63%	35%	2%
State	78%	21%	0%

SDM Family Strengths and Needs Assessment (FSNA)

Strengths/Opportunities:

# of State Wards with NO Finalized FSNA			
	Mar	**Apr**	**May**
State	48	43	14
CSA	5	4	1
ESA	16	10	2
NSA	15	16	1
SESA	5	3	3
WSA	7	10	7

Barriers:

Action Items:

Completed:

-10 Week SDM Refresher Trainings were implemented statewide.

-Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors

-Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff, etc.)

- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

Planned:

-Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
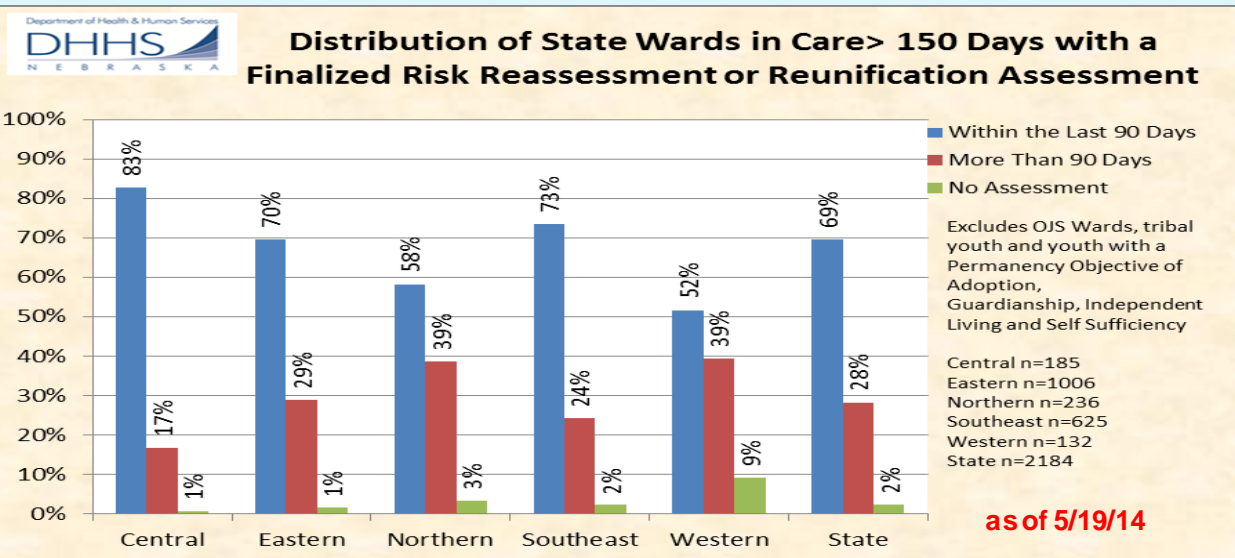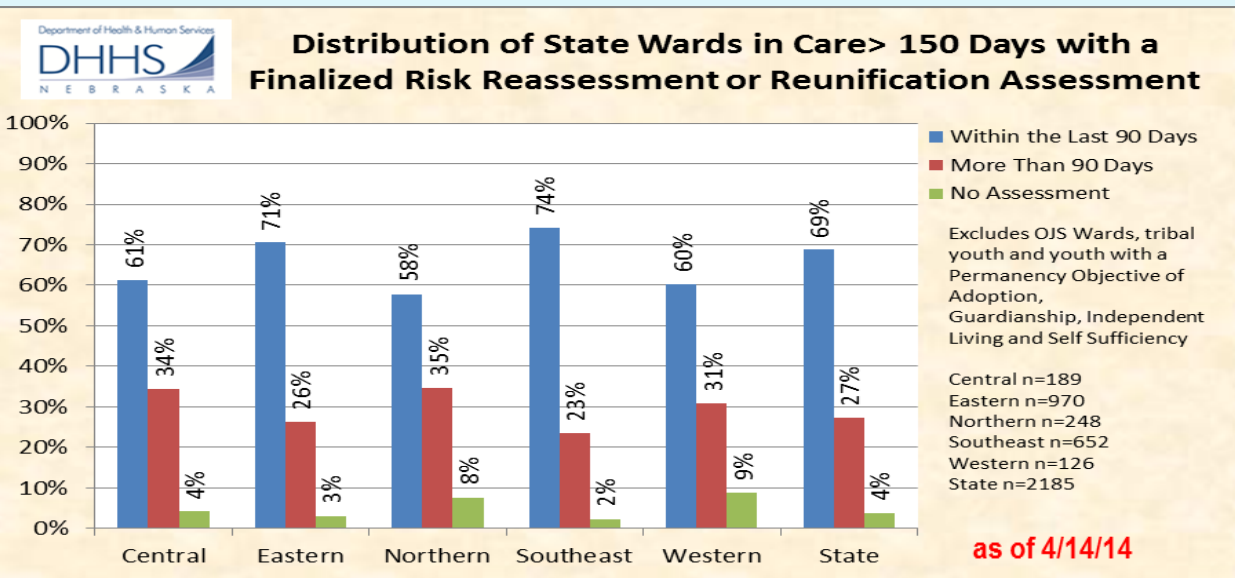
-Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

CQI Team Priority:

* ALL Service Areas

Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

Distribution of State Wards in Care > 120 Days with a Finalized FSNA

Legend: Within the Last 90 Days / More Than 90 Days / No FSNA

Excludes tribal youth

Central n=384
Eastern n=1548
Northern n=451
Southeast n=1142
Western n=275
State n=3800

as of 4/14/14

(Central: 74%, 25%, 1% | Eastern: 82%, 17%, 1% | Northern: 66%, 30%, 4% | Southeast: 84%, 15%, 0% | Western: 68%, 28%, 4% | State: 79%, 20%, 1%)

Distribution of State Wards in Care > 120 Days with a Finalized FSNA

Legend: Within the Last 90 Days / More Than 90 Days / No FSNA

Excludes tribal youth

Central n=351
Eastern n=1542
Northern n=416
Southeast n=1089
Western n=264
State n=3662

as of 5/19/14

(Central: 88%, 12%, 0% | Eastern: 79%, 21%, 0% | Northern: 73%, 27%, 0% | Southeast: 79%, 21%, 0% | Western: 61%, 37%, 3% | State: 78%, 22%, 0%)

SDM Family Strengths and Needs Assessment (FSNA)

Strengths/Opportunities:

# of Non Court Children with NO Finalized FSNA			
	Mar	**Apr**	**May**
State	3	2	5
CSA	0	0	0
ESA	2	0	3
NSA	0	1	2
SESA	1	1	0
WSA	0	0	0

Barriers:

Action Items:

Completed:

-10 Week SDM Refresher Trainings were implemented statewide.

-Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors

-Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff, etc.)

- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

Planned:

-Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.

-Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.
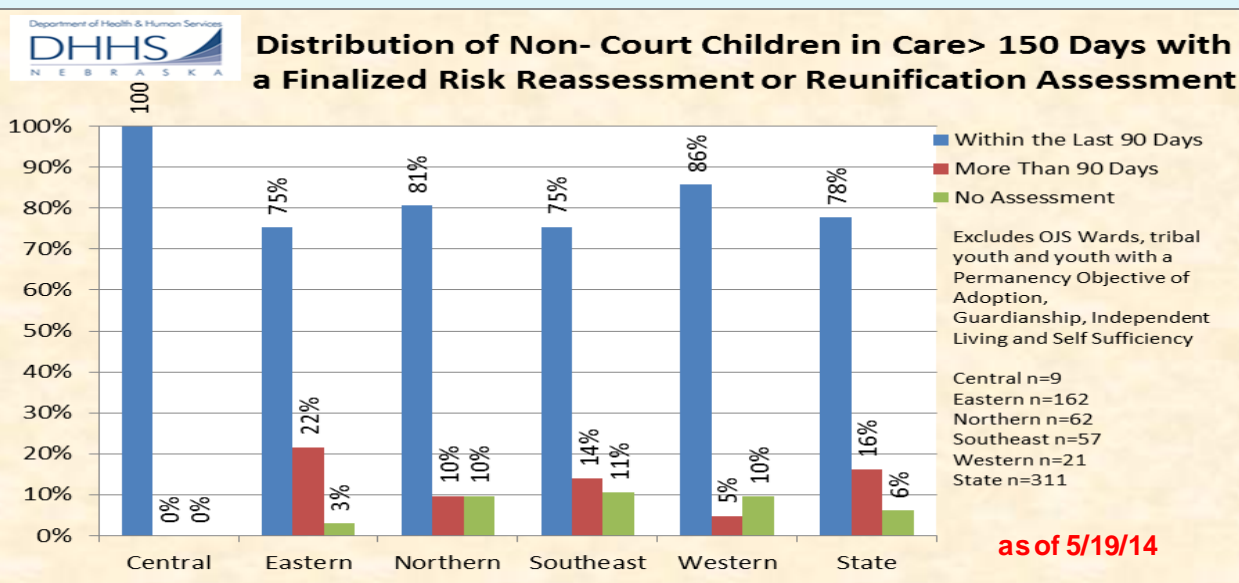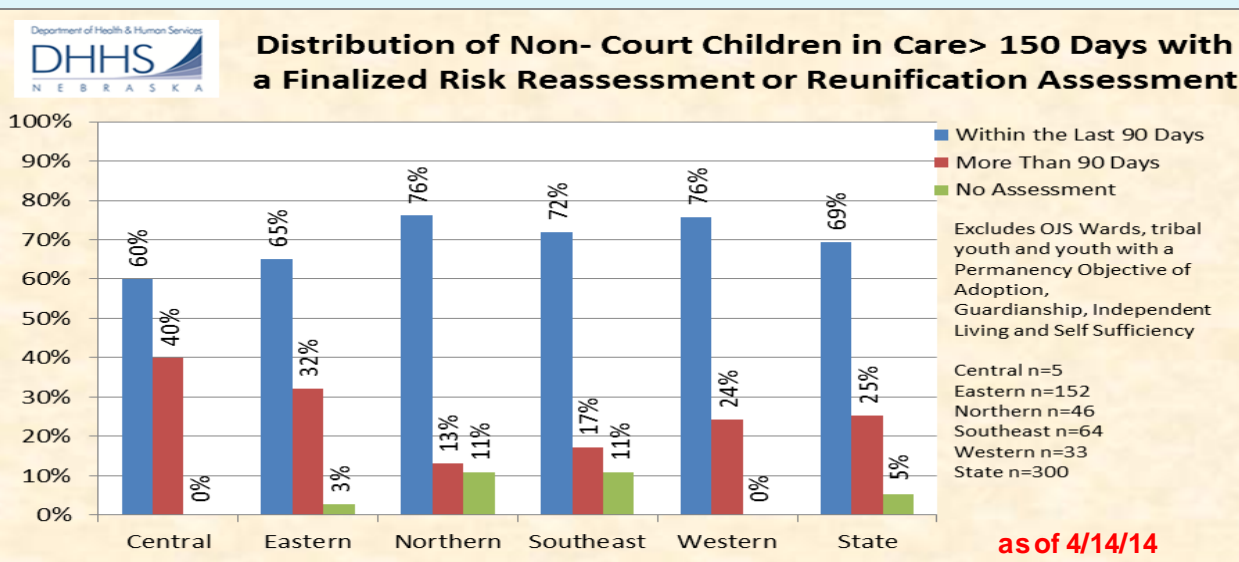
CQI Team Priority:

* ALL Service Areas

Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

Distribution of Non-Court Children in Care > 120 Days with a Finalized FSNA

Within the Last 90 Days / More Than 90 Days / No FSNA

Excludes tribal youth

Central n=12
Eastern n=200
Northern n=61
Southeast n=87
Western n=66
State n=426

as of 4/14/14

Distribution of Non-Court Children in Care > 120 Days with a Finalized FSNA

Within the Last 90 Days / More Than 90 Days / No FSNA

Excludes tribal youth

Central n=15
Eastern n=227
Northern n=79
Southeast n=82
Western n=39
State n=442

as of 5/19/14

SDM Administrative Reviews

Strengths/Opportunities:
April 2014: Decrease to 9 Admin Reviews.

> April 2014: QA Reviewers sent 22 emails Recognizing Excellent SDM Assessments or CFSR Reviews by CFS Staff

Barriers:

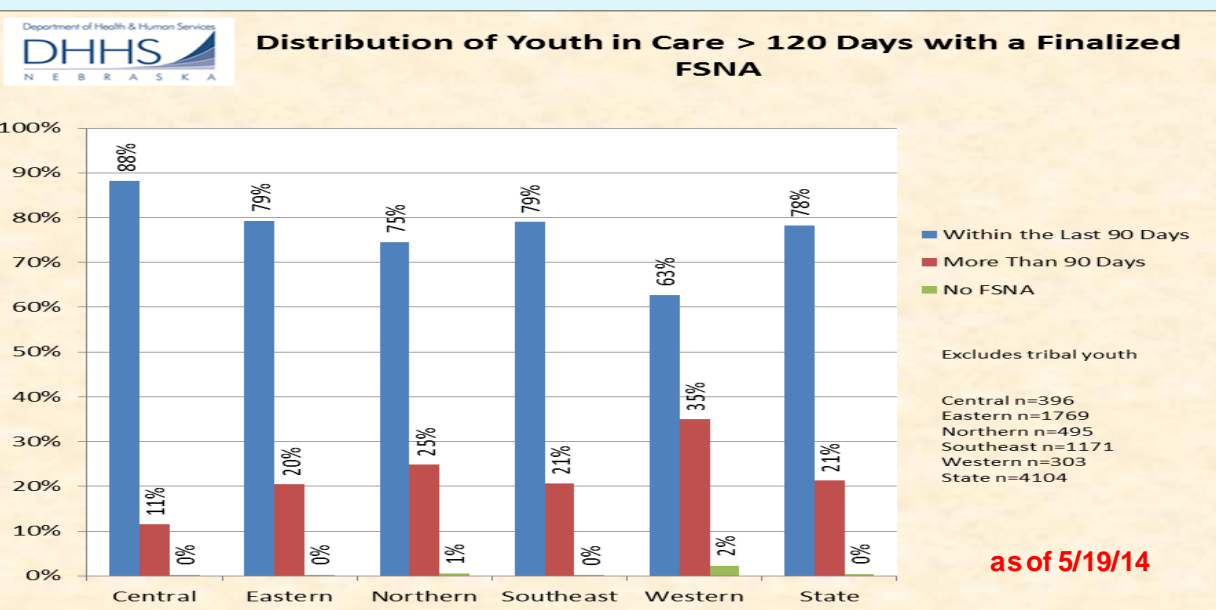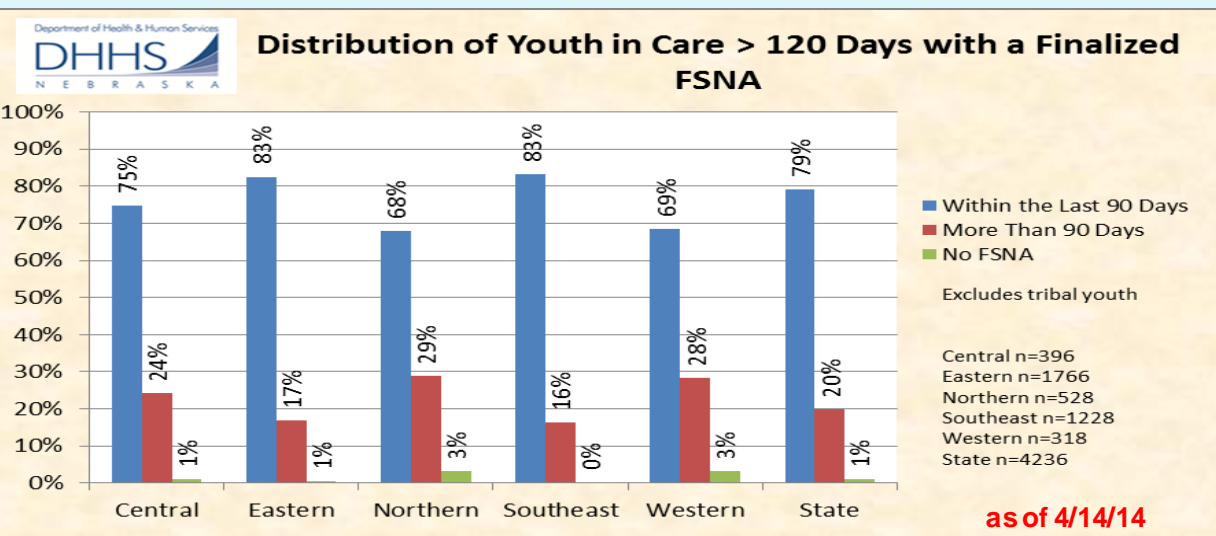**Action Items:**
Completed:
Planned:

CQI Team Priority:
* ALL Service Areas

Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

Count of SDM Admin Reviews Statewide 2013-2014

Count by Concern Summary:
2-Insufficient Information
4-Other
0-Wrong Assessment
3-Household/Caregiver

Count by Admin with 2 or more instances:
Schiermeister =4

Apr 2013	May 2013	Jun 2013	Jul 2013	Aug 2013	Sep 2013	Oct 2013	Nov 2013	Dec 2013	Jan 2014	Feb 2014	Mar 2014	Apr 2014
18	21	9	12	9	14	18	9	6	10	NA	10	9

This represents the count of Administrative Reviews sent by the QA unit to alert the Worker, Supervisor and Administrator of possible safety concerns due to lack of information or error in completion and scoring of the SDM assessment.

Note: The total number of SDM Assessments applicable for review increased in the month of November 2012 due to the following reasons: QA unit began reviewing Ongoing SDM assessments completed by NFC staff; and more ongoing SDM assessments were due and completed in CSA, NSA and WSA since SDM was implemented in July 2012.

SDM Assessment Quality Results – Finalized Timely

Strengths/Opportunities:

April 2014: Increase in timeliness for Safety, Risk Re, and FSNA. Decrease for Risk, Dependency Prevention, and Reunification.

Barriers:
Action Items:
Completed:

-10 Week SDM Refresher Trainings were implemented statewide.

-Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors

-Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff)

-N-FOCUS changes were implemented to add narrative boxes to each question on the FSNA.

-Ongoing and IA Case Management Due Date Report includes SDM due dates.

-Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

- Narrative boxes added on N-FOCUS (Risk & Prevention Assessments).
Planned:

-Brief quality quick tips will be sent to all CFS staff on SDM items that are not successfully addressed in the assessment per QA reviews.

-Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.

-Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.
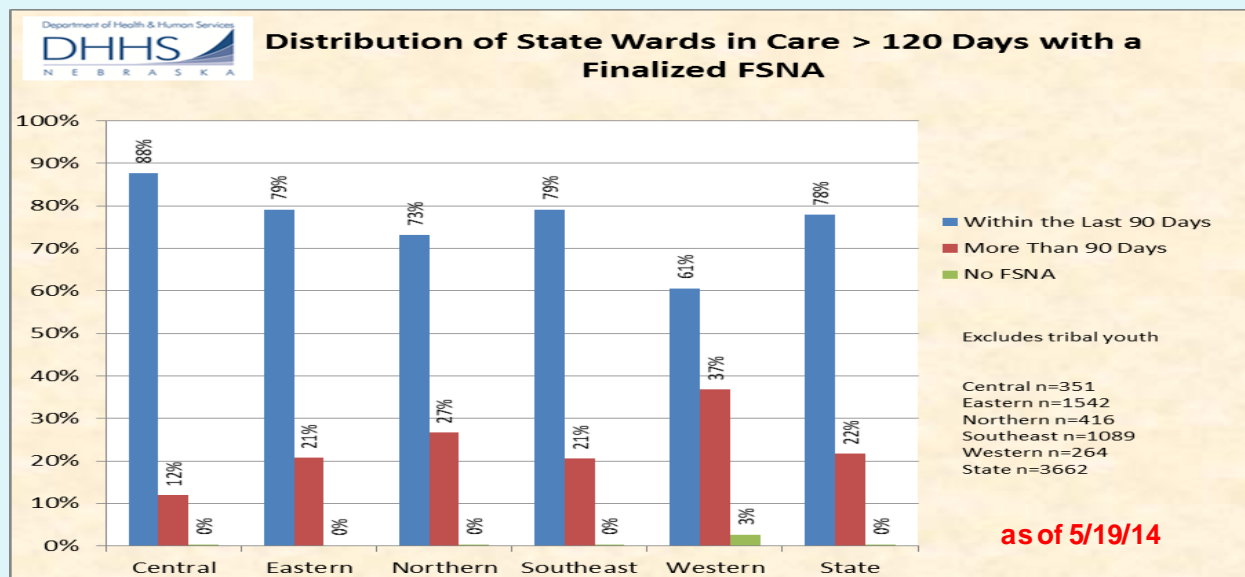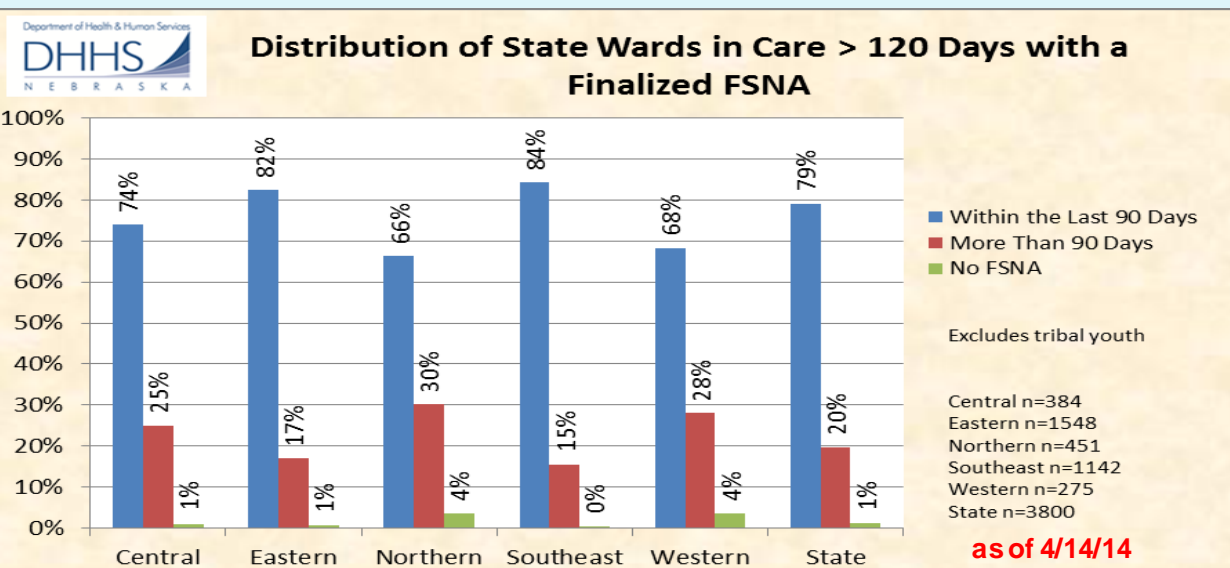
-N-FOCUS changes are planned to add narrative boxes to each question on the remaining SDM (March 2014-Risk Re and Reunification)

-Quality & Training Teams providing additional one on one and team trainings on SDM.

CQI Team Priority:

*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

SDM - QA Results
Assessment was finalized in a timely manner
December 2013 - April 2014

Department of Health & Human Services
DHHS NEBRASKA

**The QA unit did not review IA SDM's in January 2014.

**The QA unit did not review IA or Ongoing SDM's in February 2014.

Y-axis: % Accurately Performed (0% - 100%)
X-axis: Assessment Type

Legend: Dec-13, Jan-14, Mar-14, Apr-14

Assessment Type	Dec-13	Jan-14	Mar-14	Apr-14
Safety*	67%	NA	72%	79%
Risk	41%	NA	51%	49%
Prev (Dep)	37%	NA	50%	33%
Risk Re	54%	58%	48%	70%
Reunification	43%	46%	54%	50%
All FSNA	33%	43%	44%	52%

This measure shows the percentage of assessments that were finalized in a timely manner. Finalization date used for this measure is the date that the SDM assessment was finalized for all SDM Assessments except for the safety assessment.

*The safety Assessment date is the date when the assessment is placed in ready for review status by the CFS worker.

**No IA SDM assessments were reviewed during January and February 2014, and no Ongoing SDM assessments were reviewed in February 2014.

SDM Initial Assessment Quality Results

Strengths/Opportunities:
April 2014: Decrease in quality scores for Safety IA, while Safety Plan, Prevention IA and Risk all saw an increase in quality .

Barriers:

Action Items:

Completed:

-10 Week SDM Refresher Trainings were implemented statewide.

-Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors

-Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff)

-N-FOCUS changes were implemented to add narrative boxes to each question on the FSNA.

-Ongoing and IA Case Management Due Date Report includes SDM due dates.

-Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

- Narrative boxes added on N-FOCUS (Risk & Prevention Assessments).

Planned:

-Brief quality quick tips will be sent to all CFS staff on SDM items that are not successfully addressed in the assessment per QA reviews.

-Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.

-Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.
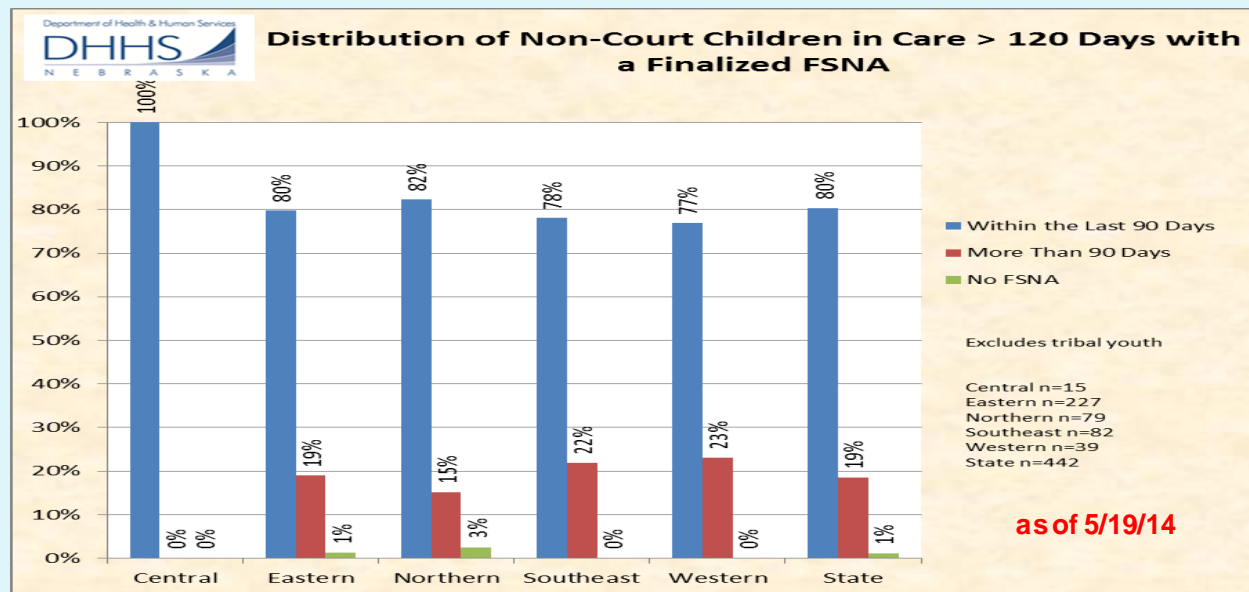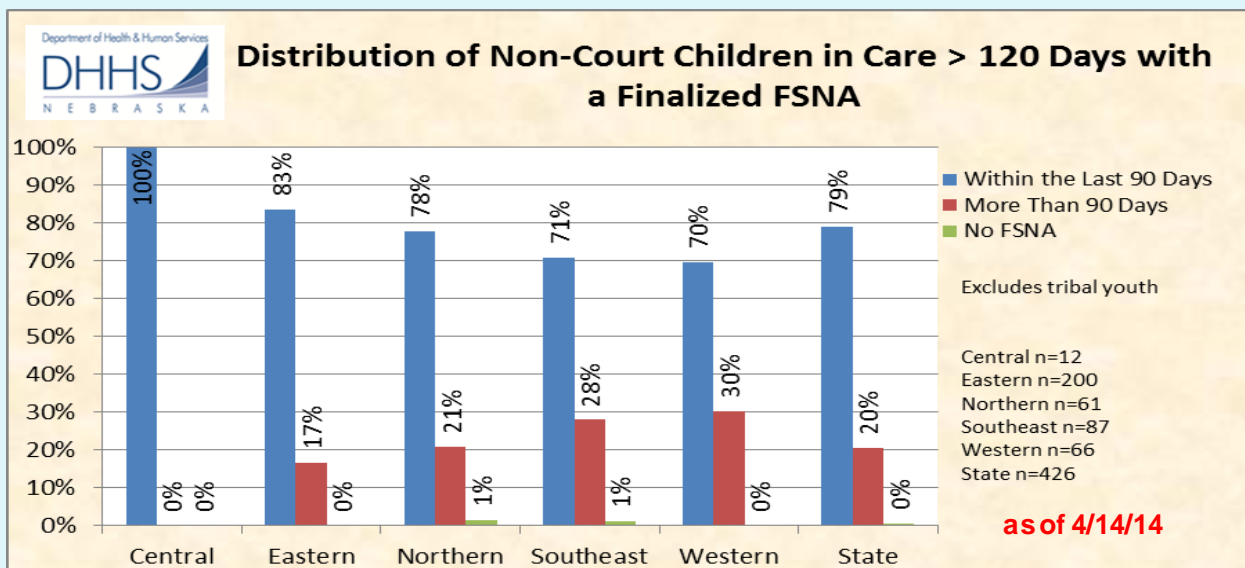
-N-FOCUS changes are planned to add narrative boxes to each question on the remaining SDM (March 2014-Risk Re and Reunification)

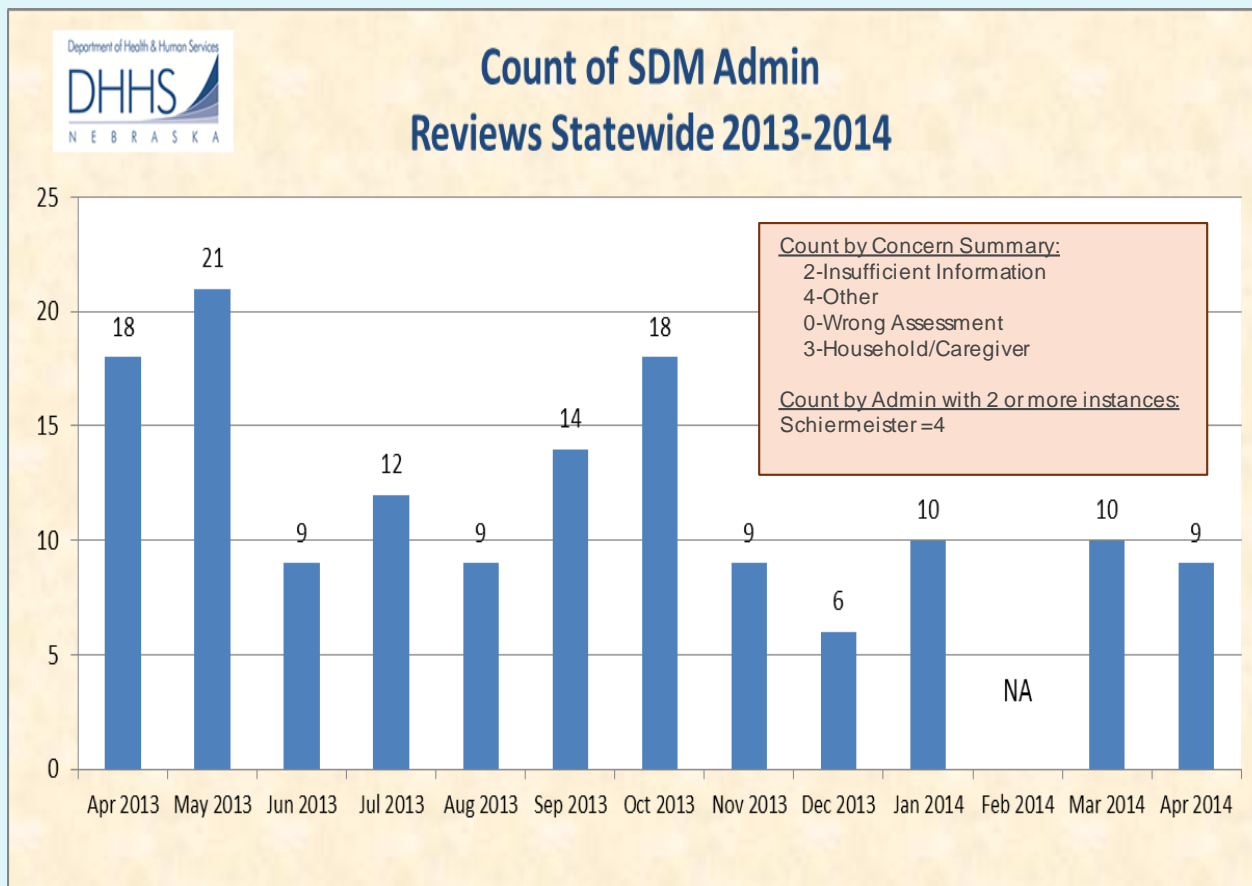-Quality & Training Teams providing additional one on one and team trainings on SDM.

CQI Team Priority:

* ALL Service Areas

Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

This measure shows the percentage of SDM indexes or questions that were supported by document narratives (total number of indexes that were supported divided by total number of applicable indexes or questions).

No IA SDM assessments were reviewed during January and February 2014.

Note: August 2013 – QA changed the review process to match program memo and practice expectations of including all supporting information for each assessment in the narrative sections of all SDM Ongoing assessments. Prior to August, QA reviewers were looking for supporting information in all N-FOCUS documentation (FTM, Req. Contacts, Court Reports etc.).

IA Risk & Prevention Least Supported

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

SDM Initial Risk Assessment
Least Supported Items Per QA Checklist Results
Note: The QA Unit did not perform IA QA Reviews in January or February 2014.

- Dec 2013.
- Mar 2014.
- Apr 2014.

Assessment Question	Dec 2013	Mar 2014	Apr 2014
* R11 - Primary Caregiver has a past or current mental health problem?	47%	54%	62%
* R12 - Primary Caregiver has a past or current alcohol or drug problem?	43%	37%	45%
* R15 - Household has two or more incidents of DV in the last year?	60%	46%	52%

SDM IA Prevention
Least Supported Items Per QA Checklist Results
Note: The QA Unit did not perform IA QA Reviews in January or February 2014.

- Dec 2013.
- Mar 2014.
- April 2014.

Assessment Question	Dec 2013	Mar 2014	April 2014
* P10 - Primary Caregiver has past or current alcohol or drug problem?	50%	45%	58%
* P14 - Household has two or more incidents of DV in the last year?	54%	50%	58%

SDM Ongoing Assessment Quality Results

Strengths/Opportunities:
April 2014: Increase in quality in Reunification and Risk Re while FSNA remained the same.

Barriers:

Action Items:

Completed:

-10 Week SDM Refresher Trainings were implemented statewide.

-Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors

-Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff)

-N-FOCUS changes were implemented to add narrative boxes to each question on the FSNA.

-Ongoing and IA Case Management Due Date Report includes SDM due dates.

-Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

- Narrative boxes added on N-FOCUS (Risk & Prevention Assessments).

Planned:

-Brief quality quick tips will be sent to all CFS staff on SDM items that are not successfully addressed in the assessment per QA reviews.

-Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.

-Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.
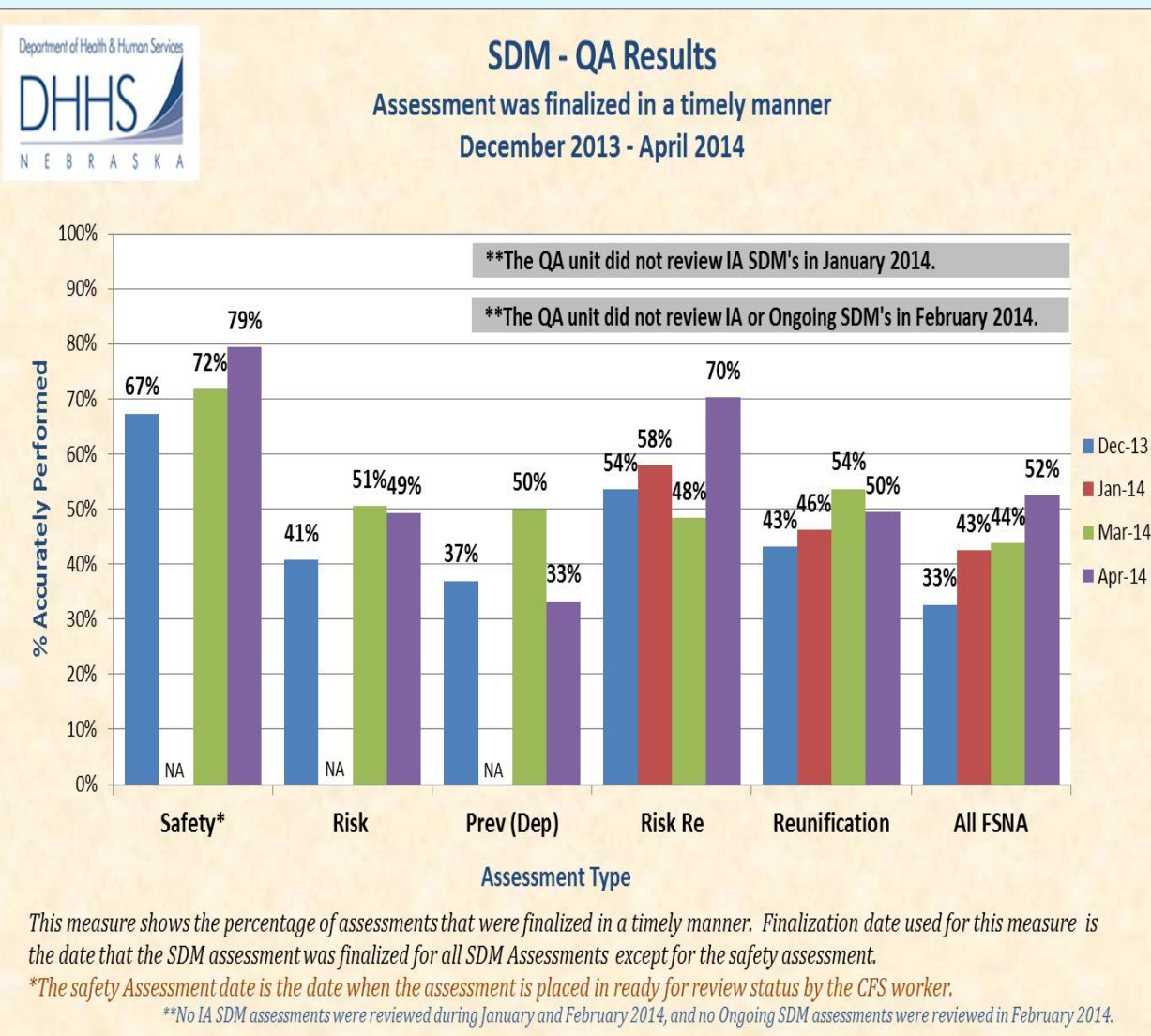
-N-FOCUS changes are planned to add narrative boxes to each question on the remaining SDM (March 2014-Risk Re and Reunification)

-Quality & Training Teams providing additional one on one and team trainings on SDM.

CQI Team Priority:
* ALL Service Areas

Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

Department of Health & Human Services
DHHS
NEBRASKA

SDM - Ongoing Quality Results
Narratives support item scoring on the SDM Assessment
(SDM by percentage of SDM Index Supported)
January 2014 - April 2014

% Accurately Performed

Risk Reassessment: Jan-14 54%, Mar-14 44%, Apr-14 54%
Reunification: Jan-14 34%, Mar-14 45%, Apr-14 46%
ALL FSNA: Jan-14 64%, Mar-14 55%, Apr-14 55%

■ Jan-14 ■ Mar-14 ■ Apr-14

This measure shows the percentage of SDM indexes or questions that were supported by document narratives (total number of indexes that were supported divided by total number of applicable indexes or questions).
Note: Reunification Data is specific to the quality of the Risk Reassessment Section of the Tool.
* No Ongoing SDM Assessments were reviewed during February 2014

Note: August 2013 – QA changed the review process to match program memo and practice expectations of including all supporting information for each assessment in the narrative sections of all SDM Ongoing assessments. Prior to August, QA reviewers were looking for supporting information in all N-FOCUS documentation (FTM, Req. Contacts, Court Reports etc.).

Ongoing Risk Re, Reunification & FSNA Least Supported

OUTCOME STATEMENT: Children Involved in the Child Protection System are Safe

SDM Risk Reassessment
Least Supported Items Per QA Checklist Results
Note: The QA Unit did not perform Ongoing QA Reviews in February 2014.

Legend: ■ Jan 2014. ■ Mar 2014. ■ Apr 2014.

- * R3: Primary Caregive has a history of abuse or neglect as a child?: 53%, 50%, 60%
- * R4: Characteristics of children in the household: 47%, 32%, 40%
- * R6: Caregiver has addressed drug or alcohol problem since last assessment.: 56%, 41%, 60%

Assessment Question
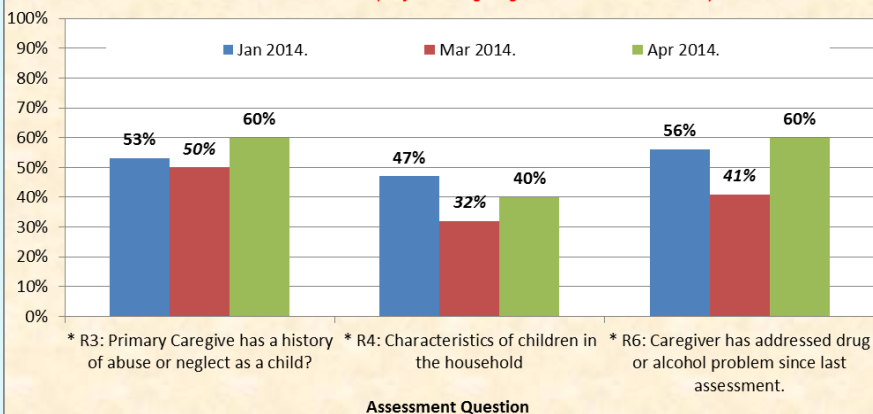
SDM Reunification Assessment
Least Supported Items Per QA Checklist Results
Note: The QA Unit did not perform Ongoing QA Reviews in February 2014.

Legend: ■ Jan 2014. ■ Mar 2014. ■ Apr 2014.

- *R4: Parenting Time: 29%, 35%, 32%
- *R5: Removal & Current Safety Threats: 25%, 36%, 32%

Assessment Question

SDM FSNA
Least Supported Items Per QA Checklist Results
Note: The QA Unit did not perform Ongoing QA Reviews in February 2014.

Legend: ■ Jan 2014. ■ Mar 2014. ■ Apr 2014.

- *CSN5: Family Relationships: 54%, 50%, 53%
- *CSN6: Child Physical and Cognitive Development: 46%, 40%, 39%
- *CSN8: Cultural Identity: 45%, 34%, 31%
- *CSN11: Life Skills: 55%, 40%, 38%

Assessment Question
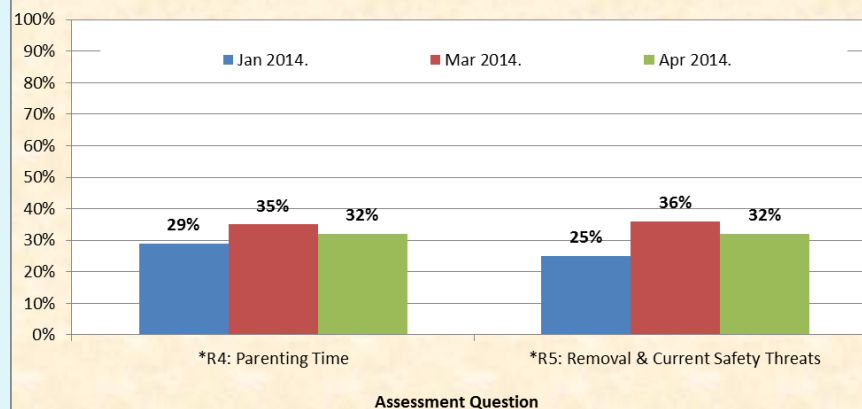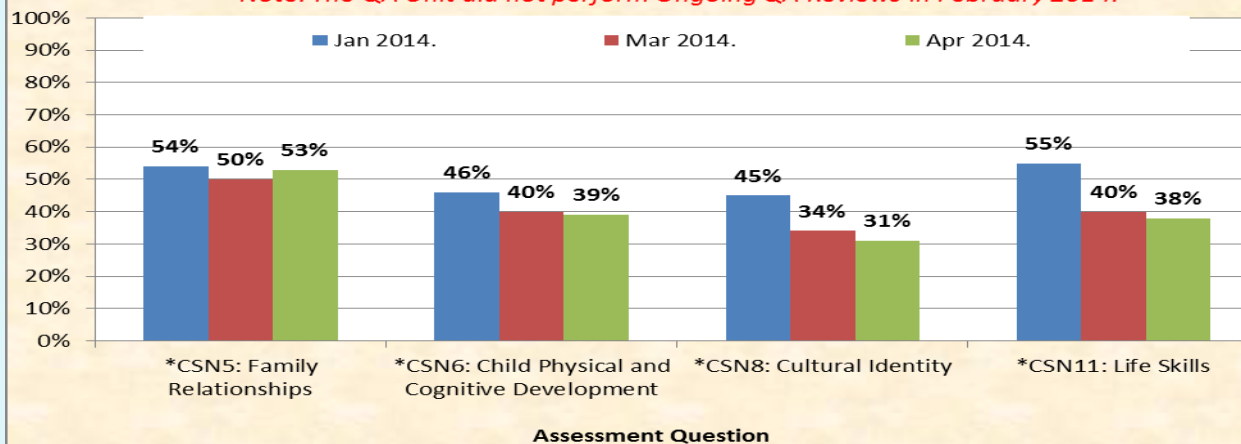
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CHAPTER 3: PERMANENCY

OUTCOME STATEMENT: CHILDREN WILL ACHIEVE TIMELY PERMANENCY (Reunification, Guardianship, Adoption and Independent Living)

Goal Statement: Front End – Children will remain home whenever safely possible. Children in out-of-home care will achieve timely permanency

Youth Placed Out of State

Strengths/Opportunities:
May 2014: On May 19th, 2014 – there were 155 youth placed outside of Nebraska. 50% of these youth are placed in congregate care.

Total Number of Youth Out of State;
March 2014 = 199
May 2014 = 155

Barriers:

Action Items:

*Refer to Local Service Area or Tribal Action Plan Forms for detailed Action Items and Strategies for each Area/Tribe.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Out-of-State Youth by Service Area

Service Area	Baseline 3/15/14	Current 05/19/14
State	199	155
Eastern	77	61
Southeast	59	54
Northern	36	27
Western	11	7
Central	16	6

Number includes children placed in Parental Home Out of State (19 as of 5/19/14)

Youth Placed Outside NE
Data as of 05/19/14

States with 2 children: CA, ID, AK, MS, OK, UT, MN

States with 1 child: SD, SC, PA, HI, NV, WY, IN, NJ, NH, MI, NC, MT, NY

IA	KS	MO	CO	IL	AZ	FL	OH	TX	LA
48	15	13	12	12	11	5	5	4	3

Out-of-State by Placement type and Service Area
Data as of 05/19/14

	Eastern	Southeast	Northern	Western	Central
Parental Home	9	4	2	2	2
Foster Care	24	22	10	1	2
Congregate Care	28	28	15	4	2

*Includes all youth and all placements out of Nebraska (parent/congregate/foster).

Placement Change Documentation w/in 72 hours

Strengths/Opportunities:

April 2014: Increase in statewide perf ormance.

State performance was at 56% in May 2012.

Barriers:

-Probation changing placements and not notif ying CFS

-Data analy sis determined that placements occurring on Thurs & Friday are not being documented timely .

-Staf f need additional training and direction on remov als and placement change documentation.

Action Items:

Completed:

-July 2013 – changes were made in N-FOCUS to allow CFS Superv isors to make corrections to placement changes in N-FOCUS.

-Workgroup tasked to work on def initions of remov als and placement changes and create instruction materials f or staf f.

-Serv ice areas are implementing creativ e methods to remind staf f to document placement changes (email reminders, signage). Serv ice area administrators are also holding staf f accountable to prov iding explanations when documentation timef rames are not met.

-CQI Tip sent to CFS Staf f with f inalized def initions and instructions about remov als and placement change documentation.

--Pop Up window on n-f ocus whenev er staf f document a placement that exceeds the 72 hour timef rame (March 2014 release).

Planned:

-CFS Admin will submit a list and reason for missed timeframes to Deputy Director Maca.

CQI Team Priority:

*Central, Northern, Southeast and Western Serv ice Areas.

*Tribes

*Refer to Local Service Area or Tribal Action Plan Forms for detailed Action Items and Strategies for each Area/Tribe.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Documentation of Placement Changes within 72 Hours　　Goal: 100%

Legend: Nov 2013, Dec 2013, Jan 2014, Feb 2014, Mar 2014, Apr 2014

Area	Nov 2013	Dec 2013	Jan 2014	Feb 2014	Mar 2014	Apr 2014
ESA(NFC)	90.8%	84.9%	92.4%	92.8%	92.2%	92.2%
SESA	94.1%	88.8%	89.0%	91.3%	93.8%	94.2%
CSA	85.1%	81.1%	86.8%	86.4%	89.5%	91.9%
NSA	96.4%	87.2%	89.3%	94.5%	96.0%	89.7%
WSA	97.4%	97.1%	90.9%	93.1%	92.3%	94.3%
Tribal	22.8%	8.9%	36.4%	33.3%	13.0%	37.0%
State	88.0%	83.6%	88.5%	89.8%	87.4%	90.6%

All contact information shall be up-to-date on N-FOCUS within seventy-two hours of any placement change for children in out of home care. The data represents the percentage of placement changes that were documented on N-FOCUS within 72 hours. Data includes OJS Wards. (Data Source: NFOCUS Placement Documentation/InfoView Report).

Family Team Meeting Frequency

Strengths/Opportunities:
April 2014: Slight decrease in state performance to 93.2%. **ESA has the highest score at 99.3%.** Tribes have the lowest score at 2.8%.

Note: The State performance was at 76.2% in May 2012.

Barriers:
-Lack of documentation in tribal cases.

Action Items:
Completed:
-Service Area Admin/Staff sent FTM templates to the Training Administrator, to put together a common guide/template for new worker and current worker training.
-Case management due date report includes Family Team Meetings. .
-Procedure Update #15-2013 regarding Family Team Meetings was issued on 4/19/13.
-Central Office Staff made necessary changes to FTM report on Performance Accountability Report.
-Quality Team is reviewing FTM documentation that are submitted by CFSS and provide feedback to improve quality.
--Deputy Director and Training Administrator put together a plan to address Family Team Meeting Quality.

Planned:

CQI Team Priority:
*Central, Eastern, Northern, and Western Service Areas
*Tribes

Refer to Local Service Area or Tribal Action Plan Forms for detailed Action Items and Strategies for each Area/Tribe.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Family Team Meeting - Once Every 90 Days   Goal = 100%

Area	Nov 2013	Dec 2013	Jan 2014	Feb 2014	Mar 2014	Apr 2014
ESA(NFC)	99.0%	98.8%	99.0%	99.2%	99.5%	99.3%
SESA	97.0%	97.5%	98.0%	98.3%	97.1%	96.0%
CSA	84.3%	89.5%	91.4%	93.0%	94.4%	92.6%
NSA	99.5%	99.7%	99.2%	98.9%	97.7%	99.1%
WSA	94.9%	95.3%	96.2%	97.0%	93.0%	92.3%
Tribal	5.8%	2.1%	2.7%	1.7%	0.9%	2.8%
State	92.4%	92.7%	92.9%	93.9%	93.6%	93.2%

Note: Case manager will facilitate a family team meeting once every 90 days
(Data Source: CWS & OJS Performance Accountability Data - NFOCUS/InfoView Report). Data Includes OJS Wards.

Family Team Meeting Quality

Strengths/Opportunities:
April 2014: Lowest performance in the following measure: FTM Documentation reflecting next steps (23%). Most of the items scored less than 60%

Barriers:

Action Items:

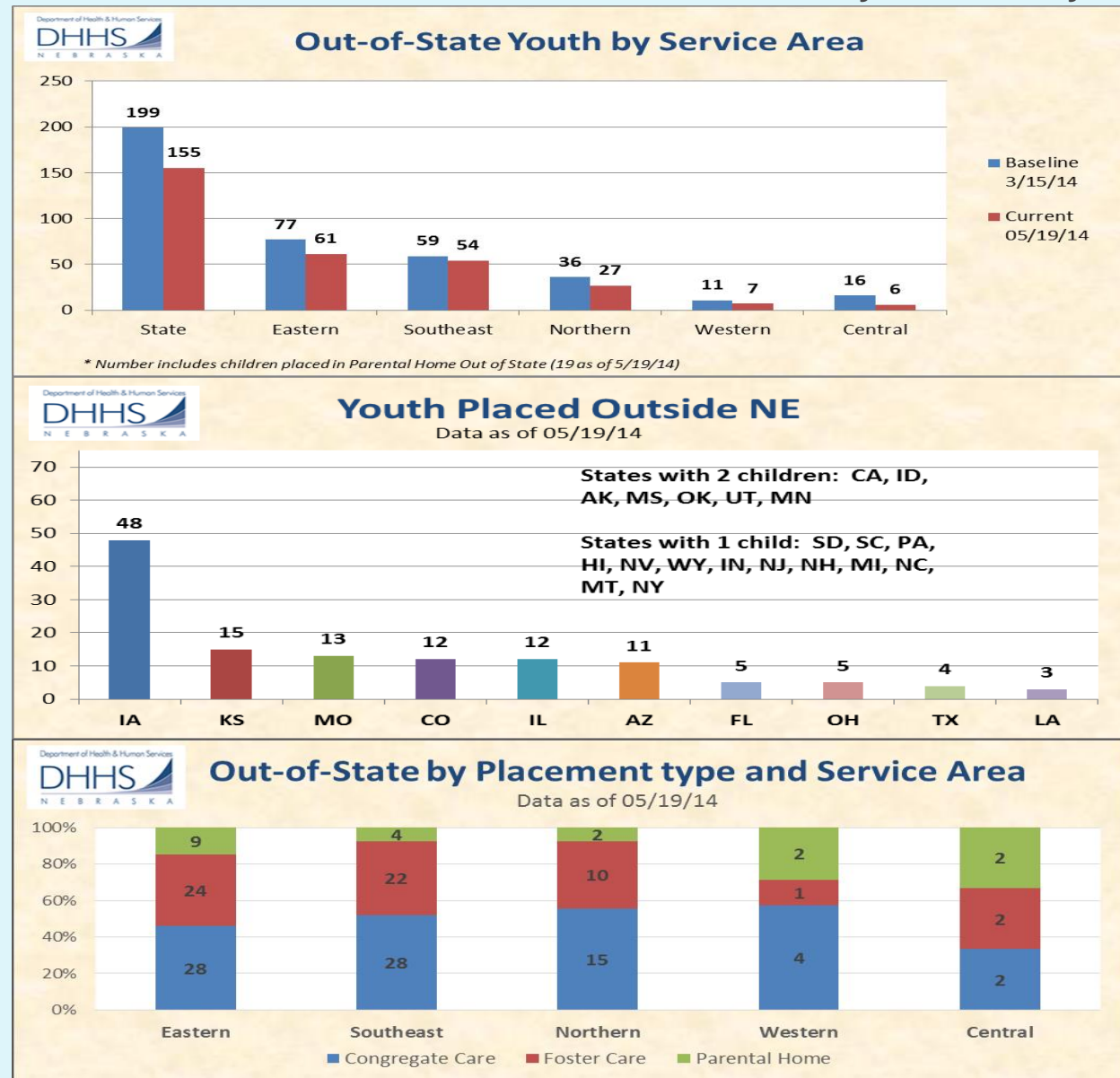**CQI Team Priority:**
*Central, Eastern, Northern, and Western Service Areas
*Tribes

*Refer to Local Service Area or Tribal Action Plan Forms for detailed Action Items and Strategies for each Area/Tribe.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

State Wide - FTM Quality Documentation Reviews - Section 1: General Meeting Information

Goal: 100%

Legend: Mar-14, Apr-14, May-14

Measure	Mar-14	Apr-14
Documentation entered into NFOCUS in a timely manner?	99%	100%
Documentation included name and roles of ALL team members?	59%	57%
Documentation included location of the FTM?	55%	54%
Does the narrative reflect next steps?	26%	23%

Number of FTM reviews by month: March 2014: 164, April 2014: 164.

This chart illustrates the percentage achieved for five measures that are part of the FTM QA Review. The FTM QA reviews are completed on a random sample of all the FTMs that are completed in a review month. The FTM Quality Review process was implemented in March 2014.

Family Team Meeting Quality

Strengths/Opportunities:
April 2014: Lowest performance in the following measures: Father Involvement (17%) and Informal Support Involvement in FTM (9%). All items scored less than 50%.

Barriers:

Action Items:

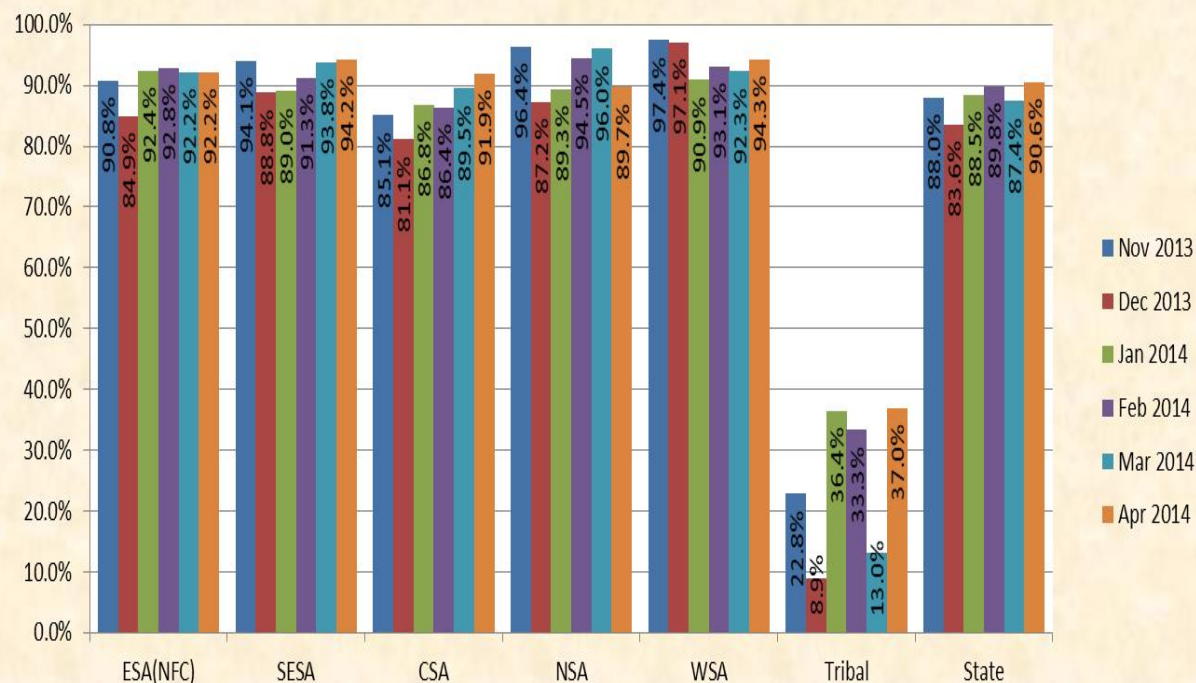**CQI Team Priority:**
*Central, Eastern, Northern, and Western Service Areas
*Tribes

*Refer to Local Service Area or Tribal Action Plan Forms for detailed Action Items and Strategies for each Area/Tribe.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

State Wide - FTM Quality Documentation Reviews - Section 2: Team Membership, Attendance, & Participation
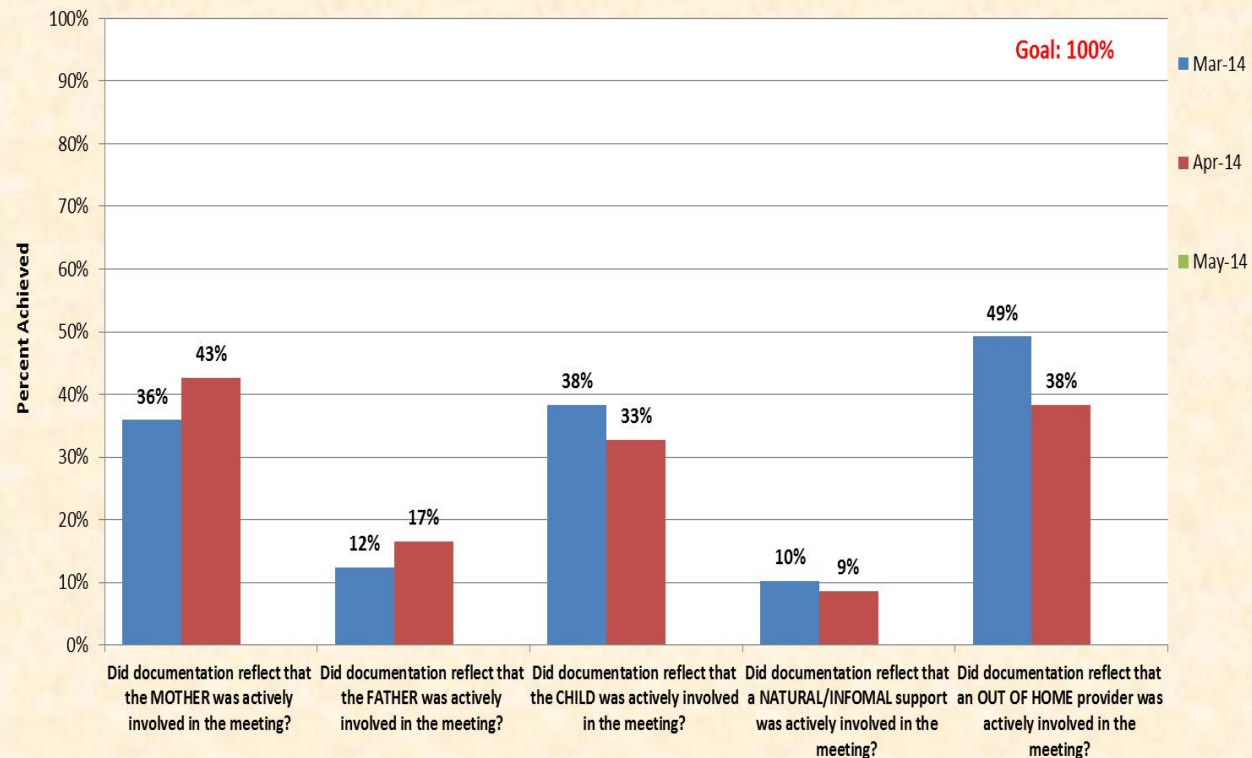
Goal: 100%

Mar-14, Apr-14, May-14

Did documentation reflect that the MOTHER was actively involved in the meeting? — Mar-14: 36%, Apr-14: 43%
Did documentation reflect that the FATHER was actively involved in the meeting? — Mar-14: 12%, Apr-14: 17%
Did documentation reflect that the CHILD was actively involved in the meeting? — Mar-14: 38%, Apr-14: 33%
Did documentation reflect that a NATURAL/INFOMAL support was actively involved in the meeting? — Mar-14: 10%, Apr-14: 9%
Did documentation reflect that an OUT OF HOME provider was actively involved in the meeting? — Mar-14: 49%, Apr-14: 38%

Number of FTM reviews by month: March 2014: 164, April 2014: 164.

This chart illustrates the percentage achieved for five measures that are part of the FTM QA Review. The FTM QA reviews are completed on a random sample of all the FTMs that are completed in a review month. The FTM Quality Review process was implemented in March 2014.

Family Team Meeting Quality

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Strengths/Opportunities:
April 2014: Lowest performance in the following measures: Barriers/Progress towards Concurrent Permanency Goal (16%) and Informal supports to help execute interventions (12%). All items scored less than 60%.

Barriers:

Action Items:

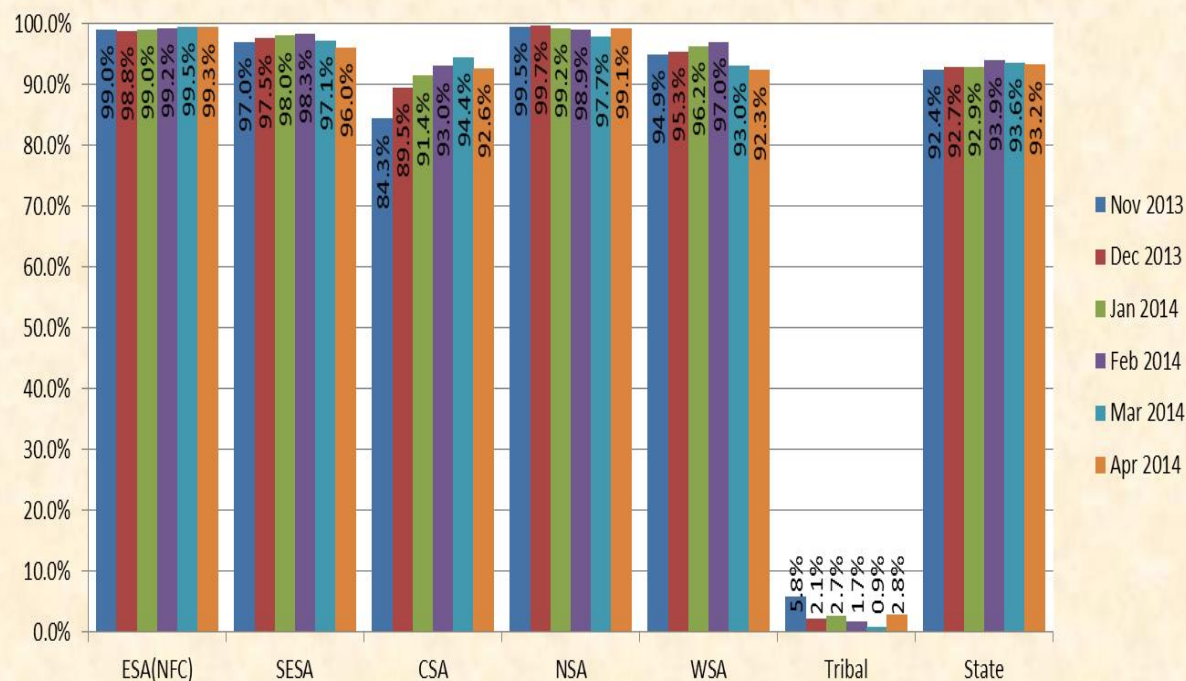**CQI Team Priority:**
*Central, Eastern, Northern, and Western Service Areas
*Tribes

*Refer to Local Service Area or Tribal Action Plan Forms for detailed Action Items and Strategies for each Area/Tribe.

Data Review Frequency: Monthly

State Wide - FTM Quality Documentation Reviews -
Section 3: Purpose and Goals of the Family Team Meeting

Goal: 100%

Legend: Mar-14, Apr-14, May-14

Measure	Mar-14	Apr-14
Team members discussed Risk and Safety issues related to SDM assessments or the YLS?	48%	55%
Discussion at the FTM addressed progress and/or barriers to progress for the child's PRIMARY permanency goal?	48%	43%
Discussion at the FTM addressed progress and/or barriers to progress for the child's CONCURRENT permanency goal?	9%	16%
Team members identified or reviewed appropriate needs related to the goals?	49%	54%
Team members identified or reviewed appropriate interventions related to the identified needs?	56%	54%
Team members identified or reviewed appropriate strengths to help execute identified strategies/interventions?	29%	21%
Team members identified or reviewed informal supports to help execute identified interventions?	13%	12%

Number of FTM reviews by month: March 2014: 164, April 2014: 164.

This chart illustrates the percentage achieved for five measures that are part of the FTM QA Review. The FTM QA reviews are completed on a random sample of all the FTMs that are completed in a review month. The FTM Quality Review process was implemented in March 2014.

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Family Team Meeting Quality

Strengths/Opportunities:
April 2014: These 6 items were picked out of all the FTM measures for the state to target improvements.

Barriers:

Action Items:

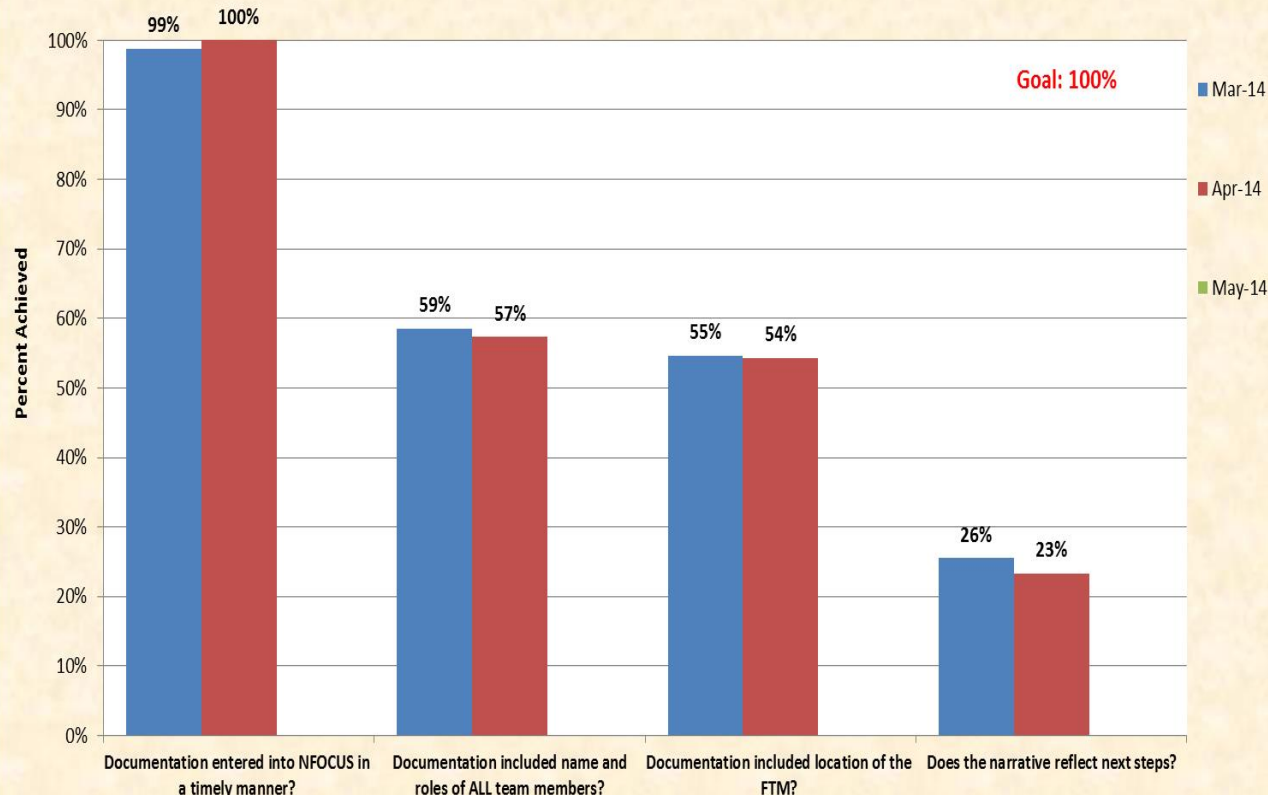**CQI Team Priority:**
*Central, Eastern, Northern, and Western Service Areas
*Tribes

*Refer to Local Service Area or Tribal Action Plan Forms for detailed Action Items and Strategies for each Area/Tribe.

Data Review Frequency: Monthly

State Wide - FTM Quality Documentation Reviews - Target Areas Needing Improvement

Goal: 100%

Legend: Mar-14, Apr-14, May-14

Measure	Mar-14	Apr-14
Does the narrative reflect next steps?	26%	23%
Did documentation reflect that the MOTHER was actively involved in the meeting?	36%	43%
Did documentation reflect that the FATHER was actively involved in the meeting?	12%	17%
Team members discussed Risk and Safety issues related to SDM assessments or the YLS?	48%	55%
Discussion at the FTM addressed progress and/or barriers to progress for the child's PRIMARY permanency goal?	48%	43%
Discussion at the FTM addressed progress and/or barriers to progress for the child's CONCURRENT permanency goal?	9%	16%

Number of FTM reviews by month: March 2014: 164, April 2014: 164

This chart illustrates the percentage achieved for five measures that are part of the FTM QA Review. The FTM QA reviews are completed on a random sample of all the FTMs that are completed in a review month. The FTM Quality Review process was implemented in March 2014.

Case Planning Involvement – CFSR 18

Strengths/Opportunities:

Note: The CFSR review results are based on a review of N-FOCUS documentation and information obtained during phone interviews with the CFSS or FPS.

Barriers:

- Lack of ongoing efforts to locate and/or engage non-custodial parent in case planning (in most cases, this is the child's father).
- Lack of ongoing efforts engage developmentally appropriate children in case planning.
- Lack of good quality documentation during family team meetings and face to face contacts between the worker, children, mother and father. Documentation should clearly state how the parent or youth was engaged in the creation of, ongoing evaluation and discussions regarding progress and needs related to case plan goals.

Action Items:

Completed:

Planned:

- S.Haber will send a list of documents to scan on N-FOCUS.
- S.Haber and team will review and expand non-custodial parent memo to include instructions for engaging the non custodial parent.

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

CFSR Item 18
Child and Family Involvement in Case Planning

Legend:
- Oct 2011 - Oct 2012 (n=75)
- Dec 2011 - Dec 2012 (n=150)
- Feb 2012 - Feb 2013 (n=150)
- May 2012 - May 2013 (n=150)
- Oct 2012 - Oct 2013 (n=240)
- Dec 2012 - Dec 2013 (n=240)
- Feb 2013 - Feb 2014 (n=240)

Region	Oct11-Oct12	Dec11-Dec12	Feb12-Feb13	May12-May13	Oct12-Oct13	Dec12-Dec13	Feb13-Feb14
State	44%	32%	48%	52%	46%	51%	51%
Central	36%	29%	57%	33%	49%	35%	48%
Eastern	61%	25%	39%	60%	40%	58%	52%
Northern	69%	46%	43%	43%	36%	51%	56%
Southeast	7%	32%	48%	68%	57%	47%	52%
Western	43%	25%	57%	54%	47%	61%	48%

Item 18 looks at whether or not the agency made concerted efforts during the period under review to involve the parent (mother and father) and the children during the case planning process. Children and parents have to contribute to the creation of the case plan goals and review them with the agency on an ongoing basis for this item to be rated as a strength.

This data was added to the Statewide CQI packet in October 2013.

Child, Parent & Foster Parent Needs Assessment – CFSR 17

Strengths/Opportunities:

Note: The CFSR review results are based on a review of N-FOCUS documentation and information obtained during phone interviews with the CFSS or FPS.

Barriers:

- Lack of good quality documentation during face to face contacts between the worker and the child. Documentation should contain sufficient information to address safety, permanency and well-being.

Action Items:

Completed:

Planned:

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Department of Health & Human Services

DHHS
NEBRASKA

CFSR Item 17 - Needs and Services for the Child, Parent, and Foster Parents

Legend:
- Oct 2011 - Oct 2012 (n=75)
- Dec 2011 - Dec 2012 (n=150)
- Feb 2012 - Feb 2013 (n=150)
- May 2012 - May 2013 (n=150)
- Oct 2012 - Oct 2013 (n=240)
- Dec 2012 - Dec 2013 (n=240)
- Feb 2013 - Feb 2014 (n=240)

	17 A	17 B	17 C	Item 17
Oct 2011 - Oct 2012	83%	56%	79%	44%
Dec 2011 - Dec 2012	75%	35%	73%	32%
Feb 2012 - Feb 2013	84%	55%	86%	50%
May 2012 - May 2013	90%	62%	87%	57%
Oct 2012 - Oct 2013	89%	51%	88%	47%
Dec 2012 - Dec 2013	93%	54%	94%	51%
Feb 2013 - Feb 2014	93%	55%	93%	55%

Item 17 on the CFSR determines whether or not the agency made concerted efforts during the period under review to assess the child, parents and foster parents needs and provide services to meet needs that were identified. Item 17 A is about the children's needs and services, 17 B is about both the mother and father's needs and services, and 17 C is about the foster parents needs and services. The three parts of Item 17 are combined into one item as a whole to determine if the overall item is a strength or area needing improvement. Note:

This data was added to the Statewide CQI packet in October 2013.

Caseworker Contact with Parent CFSR 20

Strengths/Opportunities:

Note: The CFSR review results are based on a review of N-FOCUS documentation and information obtained during phone interviews with the CFSS or FPS.

Barriers:
- Lack of ongoing efforts to locate and/or assess the needs of the child's non-custodial parent (in most cases, this is the child's father).
- Lack of good quality documentation during face to face contacts between the worker and the child, child's mother and father. Needs assessment for the child, mother and father can be addressed informally through monthly face to face contacts.
- Lack of ongoing formal needs assessment (no evidence of ongoing completion of SDM FSNA).

Action Items:
Completed:

Planned:
- *CQI Team will provide captivate and instructions on the new/improved required contact fields on N-FOCUS.*
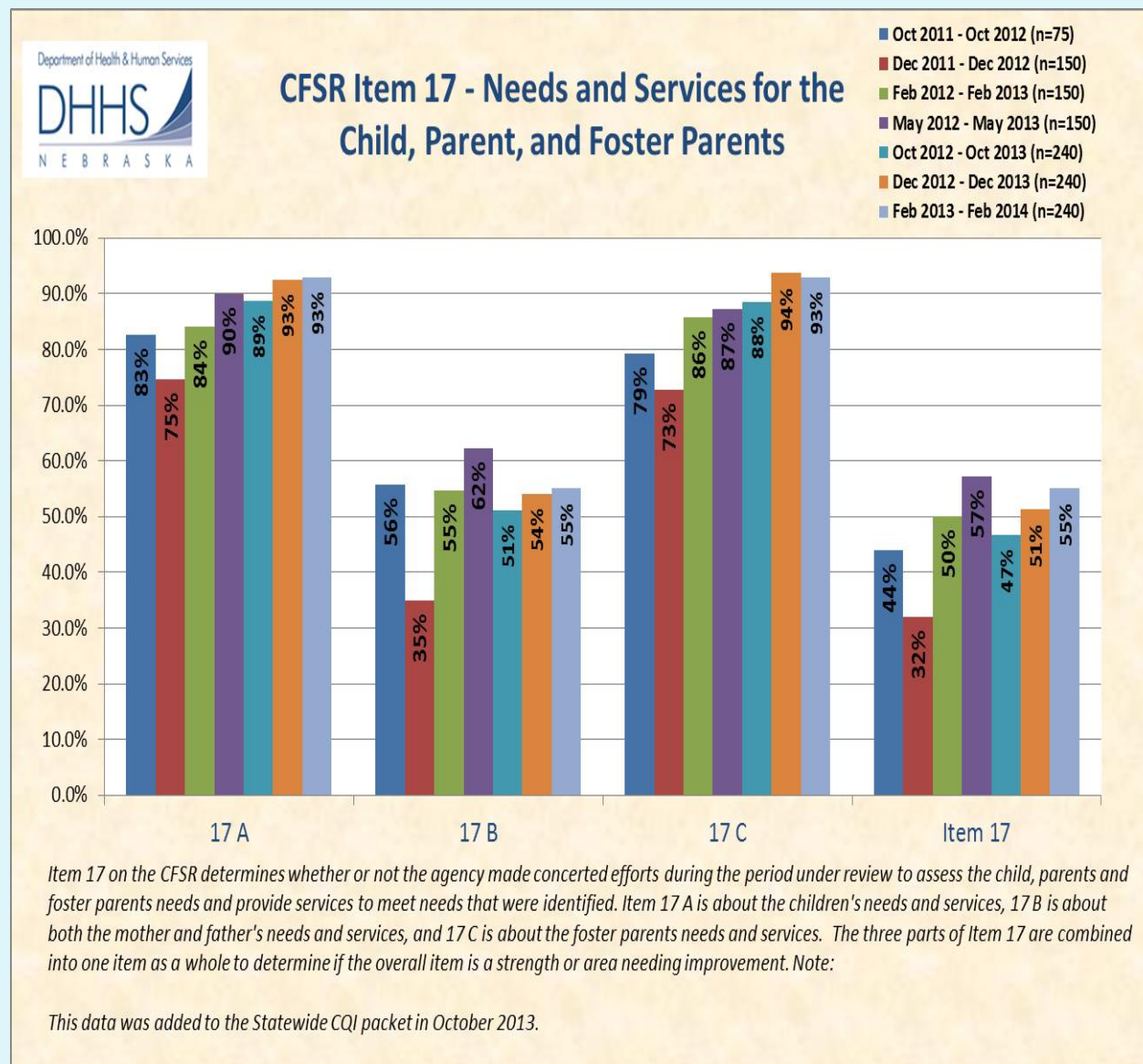- *S.Haber will update procedures memo to include clarification regarding parent contact when the child's permanency goal is something other than reunification or family preservation.*

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Department of Health & Human Services
DHHS
NEBRASKA

CFSR Item 20
Caseworker Visits with Parent

Legend:
- Oct 2011 - Oct 2012 (n=75)
- Dec 2011 - Dec 2012 (n=150)
- Feb 2012 - Feb 2013 (n=150)
- May 2012 - May 2013 (n=150)
- Oct 2012 - Oct 2013 (n=240)
- Dec 2012 - Dec 2013 (n=240)
- Feb 2013 - Feb 2014 (n=240)

Region	Oct 2011-Oct 2012	Dec 2011-Dec 2012	Feb 2012-Feb 2013	May 2012-May 2013	Oct 2012-Oct 2013	Dec 2012-Dec 2013	Feb 2013-Feb 2014
State	33%	17%	26%	29%	27%	32%	32%
Central	36%	19%	16%	4%	31%	20%	24%
Eastern	29%	14%	34%	50%	31%	40%	39%
Northern	38%	28%	27%	42%	14%	36%	32%
Southeast	8%	39%	20%	22%	28%	29%	35%
Western	50%	14%	31%	22%	31%	32%	35%	28%
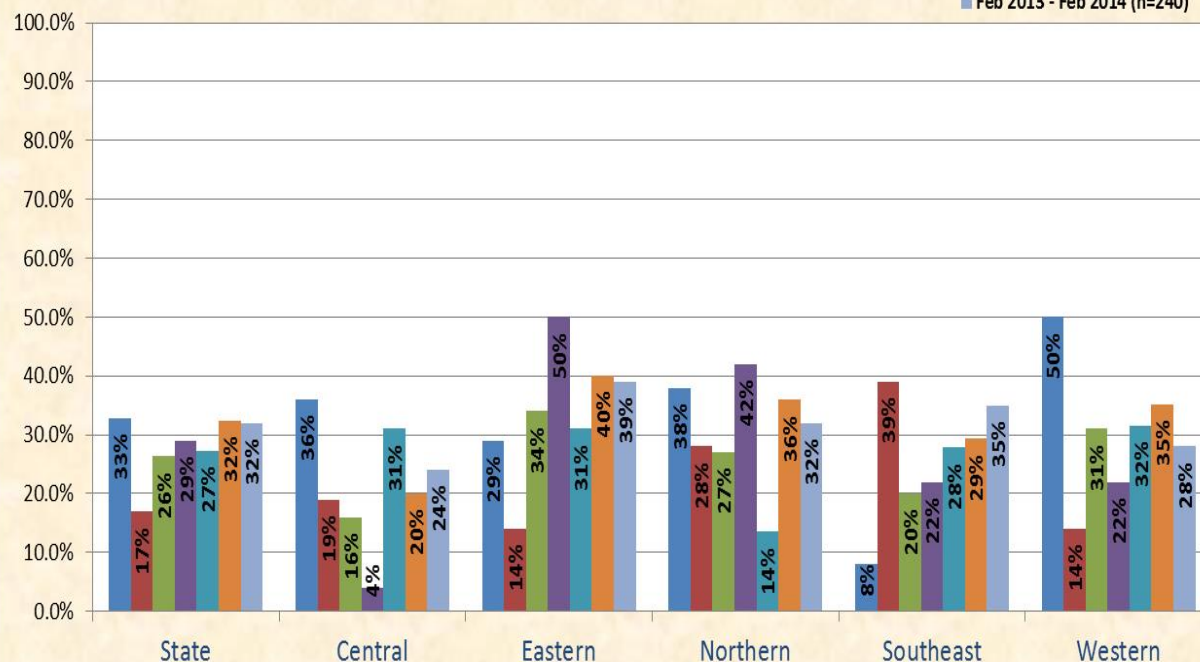
Item 20 on the CFSR looks at both the frequency and quality of the caseworker visits with both the mother and the father in the case. This item looks at whether or not the frequency and quality of visits between the caseworker and the mother and father of the child(ren) in the case were sufficient to ensure safety, permanency, and well being of the child and promote achievement of case goals. Each parent should be seen at least monthly in order for this item to be counted as a strength.

This data was added to the Statewide CQI packet in October 2013.

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Federal Visitation with State Wards

Strengths/Opportunities:

Apr 2014: New Fed Fiscal Year began in October 2013. The Federal Measure is 90%, this will increase to 95% in 2015. NE has set goal at 95% in preparation for the change with the federal measure. **State performance remains at 95% this month. Performance is 98% and above for all Service Areas but at 20% for Tribal Cases.**

Note: In SFY11, NE reported 48.4% monthly child contact with this federal measure! WOW!!!

Barriers:

-Lack of documentation in tribal cases

Action Items:

Completed:

-Case Management Due Date Report includes Monthly Child Contact.

-Sherri Haber and Sherri Eveleth will work with Vicki Maca to identify and provide support to the tribes

-SAA/CFS Admin have been submitting a list and reasons for all missed worker visits with the child to the Deputy Director for review.

-SAA/CFS Admin have been coordinating visits with all youth placed out of state to ensure visits are taking place every month.

Planned:

-*Some Service areas are planning to implement quality reviews and training with their staff on the quality of face to face contact.*

-*CQI Team will provide captivate and instructions on the new/improved required contact fields on N-FOCUS.*

CQI Team Priority:

*Central and Southeast Service Areas

*Tribes

*Refer to Local Service Area or Tribal Action Plan Forms for detailed Action Items and Strategies for each Area/Tribe.

Data Review Frequency: Monthly

Contact with Child in Out of Home Care (Federal Measure) — Goal: 95%
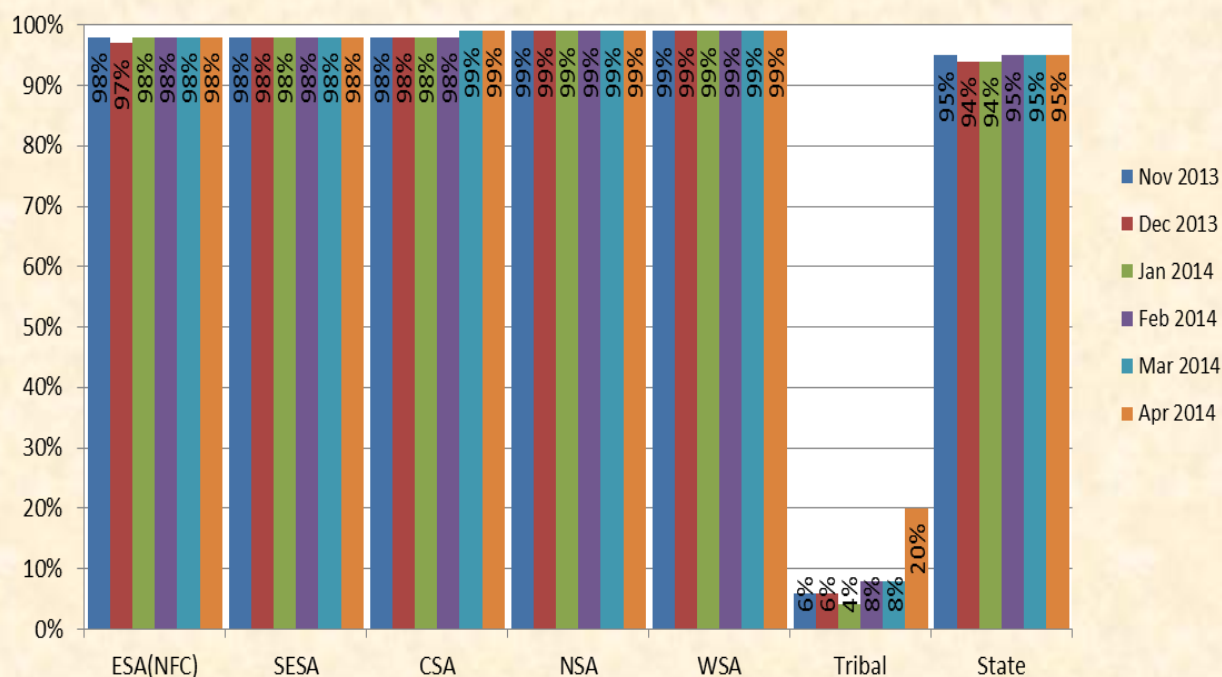
Case manager will have monthly face to face contact with the child. This federal visitation requirement is a cumulative measure for the federal fiscal year (October to December). Youth are required to be visited 95% of the months they are in out of home care. Data includes OJS Wards. (Data Source: Federal Visitation Data - NFOCUS/InfoView Reports).

Monthly Contact with State Wards and Non-Court Involved Child

Strengths/Opportunities:

April 2014: Non Court Case - statewide performance decreased to 94.9%. *Note: In May 2012, the state performance was at 53.4% for this measure.*

April 2014: State Wards – statewide increase to 95.7%. Performance is 97% and above for all Service Areas and tribal cases have gone from 6% to 42%.

Barriers:

-Lack of documentation in tribal cases

Action Items:

Completed:

-Case Management Due Date Report includes Monthly Child Contact.

-Sherri Haber and Sherri Eveleth will work with Vicki Maca to identify and provide support to the tribes

-SAA/CFS Admin have been submitting a list and reasons for all missed worker visits with the child to the Deputy Director for review.

-SAA/CFS Admin have been coordinating visits with all youth placed out of state to ensure visits are taking place every month.

Planned:

-*Some Service areas are planning to implement quality reviews and training with their staff on the quality of face to face contact*

-*CQI Team will provide captivate and instructions on the new/improved required contact fields on N-FOCUS.*

CQI Team Priority:

*Central and Southeast Service Areas

> **Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.**

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Contact with State Wards — Goal: 100%

	Nov 2013	Dec 2013	Jan 2014	Feb 2014	Mar 2014	Apr 2014
ESA(NFC)	96.8%	96.1%	97.5%	97.4%	97.4%	98.2%
SESA	98.1%	98.6%	98.5%	98.5%	98.0%	97.9%
CSA	98.0%	97.0%	99.0%	98.6%	98.7%	98.9%
NSA	98.9%	99.3%	99.8%	98.3%	99.6%	99.8%
WSA	99.0%	99.5%	99.2%	99.4%	99.7%	99.4%
Tribal	2.1%	2.3%	1.0%	4.9%	6.6%	42.0%
State	92.2%	91.8%	92.3%	93.3%	93.9%	95.7%

Contact with Child in Non Court Case — Goal: 100%

	Nov 2013	Dec 2013	Jan 2014	Feb 2014	Mar 2014	Apr 2014
ESA(NFC)	91.6%	91.7%	94.3%	97.0%	96.3%	93.2%
SESA	99.1%	99.0%	97.8%	99.0%	100.0%	94.1%
CSA	83.9%	90.2%	97.4%	95.7%	98.0%	100.0%
NSA	95.5%	95.9%	99.3%	98.8%	98.6%	98.6%
WSA	100.0%	100.0%	100.0%	94.1%	100.0%	95.9%
Tribal	NA					
State	94.2%	94.6%	96.5%	97.2%	97.8%	94.9%

Case manager will have monthly face to face contact with the child (Data Source: CWS & OJS Performance Accountability Data - NFOCUS/InfoView Reports).

Caseworker Contact with Child CFSR 19

Strengths/Opportunities:

Note: The CFSR review results are based on a review of N-FOCUS documentation and information obtained during phone interviews with the CFSS or FPS.

Barriers:

- Lack of ongoing efforts to locate and/or meet with the non-custodial parent on a monthly basis. (in most cases, this is the child's father).
- Lack of good quality documentation during face to face contacts between the worker and the child's mother and father. Documentation should contain sufficient information to address safety, permanency and well-being.

Action Items:

Completed:

Planned:

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Legend:
- Oct 2011 - Oct 2012 (n=75)
- Dec 2011 - Dec 2012 (n=150)
- Feb 2012 - Feb 2013 (n=150)
- May 2012 - May 2013 (n=150)
- Oct 2012 - Oct 2013 (n=240)
- Dec 2012 - Dec 2013 (n=240)
- Feb 2013 - Feb 2014 (n=240)

CFSR Item 19 Caseworker Visits with Child

Region	Oct 2011-Oct 2012	Dec 2011-Dec 2012	Feb 2012-Feb 2013	May 2012-May 2013	Oct 2012-Oct 2013	Dec 2012-Dec 2013	Feb 2013-Feb 2014
State	60%	51%	67%	65%	71%	78%	70%
Central	79%	43%	43%	54%	63%	78%	78%
Eastern	58%	66%	71%	79%	70%	85%	70%
Northern	79%	75%	75%	86%	63%	78%	70%
Southeast	14%	58%	71%	54%	83%	67%	70%
Western	71%	42%	71%	50%	70%	88%	63%
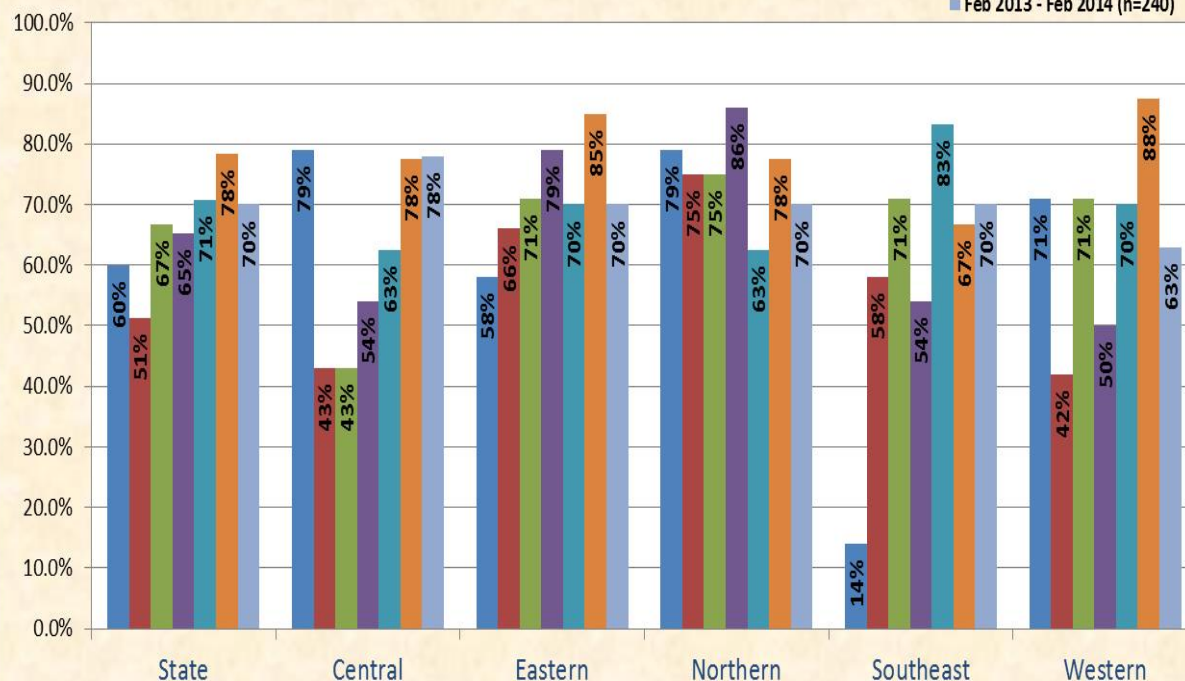
Item 19 on the CFSR looks at both the frequency and quality of the caseworker visits with the children in the case. This item looks at whether or not the frequency and quality of visits between the caseworker and the children in the case were sufficient to ensure safety, permanency, and well being of the child and promote achievement of case goals. Children should be seen privately when age appropriate and at least monthly in order for this item to be counted as a strength.

This data was added to the Statewide CQI packet in October 2013.

Permanency for Children in Foster Care

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Strengths/Opportunities:
April 2014: All Service Areas continue to meet the target goals for this measure.

Barriers:

Action Items:
Completed:

Planned:

Permanency for Children in Foster Care - COMPASS Measures

Target = 121.7

Service Area	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14
Eastern	155.5	155.5	154.6	153.7	153.0	150.0
Southeast	163.5	163.1	159.8	159.5	156.5	157.0
Central	137.3	138.5	142.2	140.5	150.4	150.9
Northern	154.9	152.3	153.1	159.5	153.2	161.0
Western	150.4	144.3	149.5	152.7	144.6	150.3
State	155.8	155.0	154.3	154.5	153.2	154.2

Permanency for Children in Foster Care

This is a Federal Composite Measure that reports on a rolling 12 month period. Data Source: N-FOCUS COMPASS-State Wards The Permanency Composite measures the frequency that permanency is achieved for children and youth who have been in care for longer periods of time. Permanency is defined as exiting care to reunification, adoption or guardianship. The Composite includes three measures: 1. Exits to Permanency Prior to the Child's 18th Birthday for Children in Care for 24 More Months or More; 2. Exits to Permanency for Children Who are Free for Adoption; and 3. Children Emancipated Who Were in Foster Care for 3 Years or More.

Data Review Frequency: Quarterly (March, June, September, December)

Timeliness of Adoption

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Strengths/Opportunities:
April 2014: CSA is the only service area not meeting this measure.

Barriers:

Action Items:
Completed:
- CQI team corrected the definition of Free for Adoption to no longer include the existence of TPR hearing for this measure.

-Eastern Service Area/NFC completed a review of 119 adoption cases and identified barriers to Adoption in ESA. Eastern Service Area continues to address barriers through Court Collaboration meetings and other processes.

Planned:

Timeliness of Adoption - COMPASS Measures

Target = 106.4

Area	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14
Eastern	123.8	126.4	124.6	122.7	133.0	128.5
Southeast	139.4	130.7	135.9	136.7	139.2	141.5
Central	104.6	97.7	100.9	102.4	103.4	106.3
Northern	128.4	126.2	123.0	120.8	127.6	125.3
Western	188.7	188.8	157.0	152.4	154.2	153.3
State	132.1	127.5	126.3	123.4	130.4	128.9

Timeliness of Adoption

This is a Federal Composite Measure: Data Source: N-FOCUS COMPASS- State wards. This is a Federal measure that reports on a rolling 12 month period. The Adoption Composite measures the timeliness of adoptions and includes the following five measures: Adoption in less than 24 Months, Median Time to Adoption, Children in care for 17 Months or Longer Who Are Adopted by the End of the Year, Children in Care for 17 Months or Longer Who Are Legally Free for Adoption within 6 Months, and Children Who Are Legally Free for Adoption Who Are Adopted within 12 Months.

Data Review Frequency: Quarterly (March, June, September, December)

Timeliness of Adoption

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Strengths/Opportunities:

April 2014: WSA continues to meet the target goal for this measure. All Service Areas saw a decrease in performance from previous month.
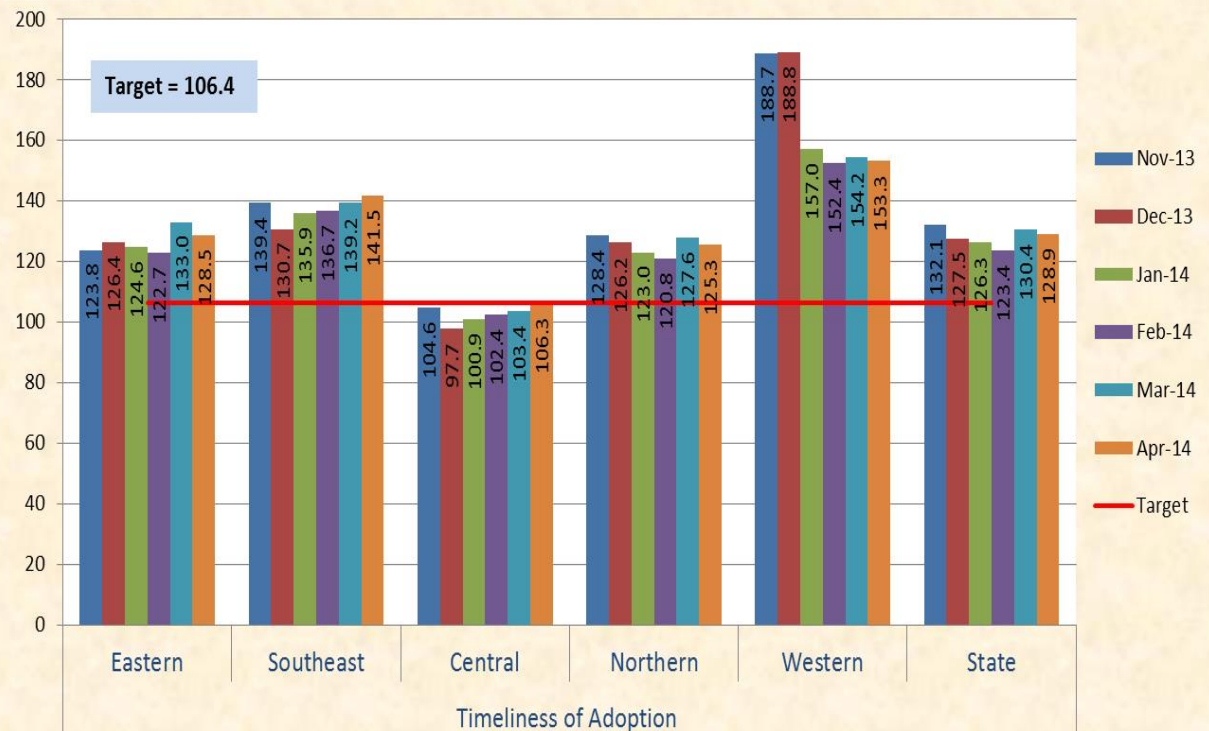
Barriers:

Action Items:

Completed:

- CQI team corrected the definition of Free for Adoption to no longer include the existence of TPR hearing for this measure.

-Eastern Service Area/NFC completed a review of 119 adoption cases and identified barriers to Adoption in ESA. Eastern Service Area continues to address barriers through Court Collaboration meetings and other processes.

Planned:

Exits to Adoption in < 24 Months - COMPASS Measures
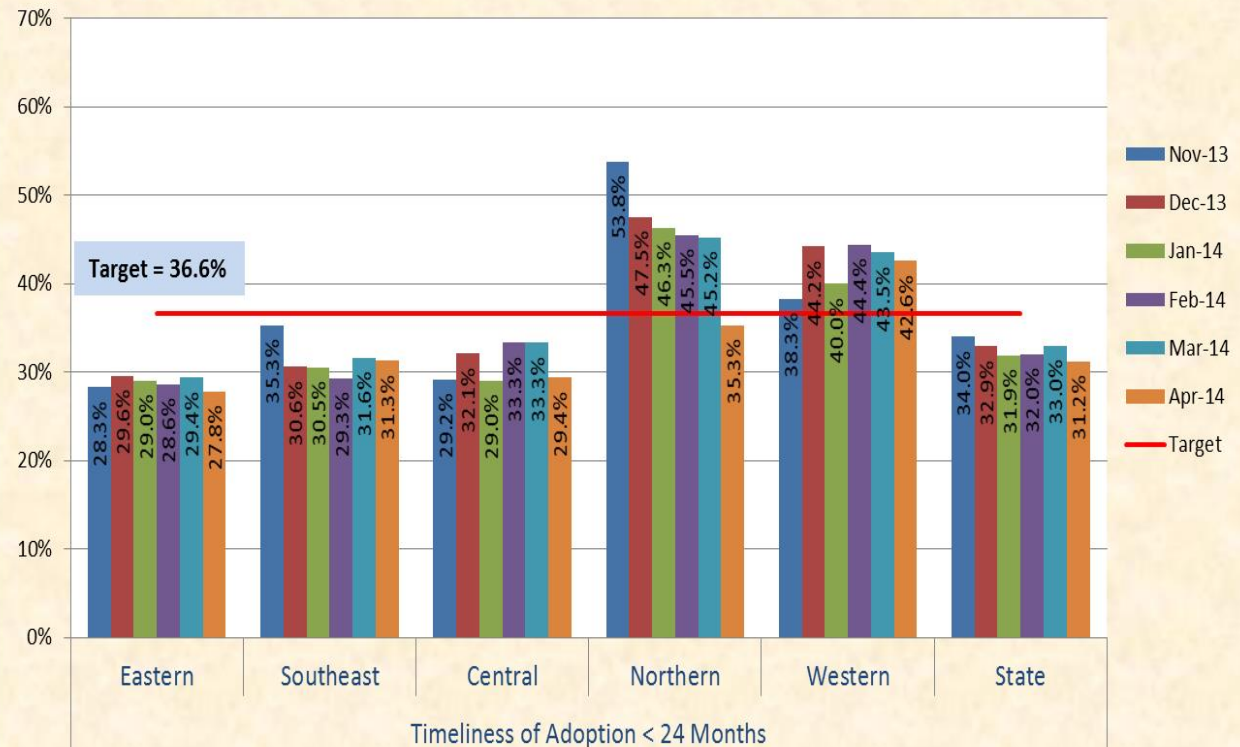
Target = 36.6%

	Eastern	Southeast	Central	Northern	Western	State
Nov-13	28.3%	35.3%	29.2%	53.8%	38.3%	34.0%
Dec-13	29.6%	30.6%	32.1%	47.5%	44.2%	32.9%
Jan-14	29.0%	30.5%	29.0%	46.3%	40.0%	31.9%
Feb-14	28.6%	29.3%	33.3%	45.5%	44.4%	32.0%
Mar-14	29.4%	31.6%	33.3%	45.2%	43.5%	33.0%
Apr-14	27.8%	31.3%	29.4%	35.3%	42.6%	31.2%

Timeliness of Adoption < 24 Months

This is Federal Measure that reports on a rolling 12 month period. Data Source: N-FOCUS COMPASS-State wards. For the reporting year, of all children who were discharged from foster care to a finalized adoption during the year, the percent that were discharged in less than 24 months from the date of the latest removal from the home.

Data Review Frequency: Quarterly (March, June, September, December)

Timeliness & Permanency of Reunification

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Strengths/Opportunities:

April 2014: SESA is now the only service area currently meeting this measure. CSA and WSA saw a decrease in their numbers.

Barriers:

Action Items:

Completed:

- CFS Staff are utilizing Average Number of Out of Home Report to look at length of time and address barriers for youth who are in Out of Home Care for an extended period of time.

- 40 Day Focus Initiatives

- A.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
- B.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

Planned:

-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement.

-Service Area CQI teams need to drill down and identify barriers to reunification.

-Service Areas should track how many requests for early hearings are denied.

- Policy & Training will work together to develop quick tip or training materials to remind staff of their role as advocates and experts and to use assessments and tools available to them to request and promote achievement of reunification.

CQI Team Priority:

*Statewide External Stakeholder Team
*Eastern, Northern, Southeast and Western Service Areas

*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

Timeliness & Permanency of Reunification - COMPASS Measures

Target = 122.6

	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14
Eastern	109.7	110.1	108.0	109.7	116.0	117.1
Southeast	120.3	120.6	120.9	120.7	120.4	124.6
Central	112.7	114.9	103.2	102.9	111.4	109.4
Northern	118.7	122.0	120.4	115.6	113.3	113.3
Western	123.2	118.2	115.2	112.6	116.6	113.4
State	113.8	114.2	111.3	111.8	114.8	116.6

Timeliness and Permanency of Reunification

This is a Federal Composite Measure. Data Source: N-FOCUS COMPASS- State Wards. This is a Federal Measure that reports on a rolling 12 month period. The Reunification Composite measures the timeliness of reunification and whether the reunification was permanent over a specific period of time. The Reunification Composite includes four measures: Reunification in Less Than 12 Months, Median Time to Reunification, Entry Cohort Reunification in Less Than 12 Months, and Permanence of Reunification.

Data Review Frequency: Quarterly (March, June, September, December)

Timeliness & Permanency of Reunification

Strengths/Opportunities:
April 2014: 60% of the exits to reunification happen between 0-12 months.

Barriers:

Action Items:
Completed:
- CFS Staff are utilizing Average Number of Out of Home Report to look at length of time and address barriers for youth who are in Out of Home Care for an extended period of time.
- 40 Day Focus Initiatives
    - A.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
    - B.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

Planned:
-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement.

CQI Team Priority:
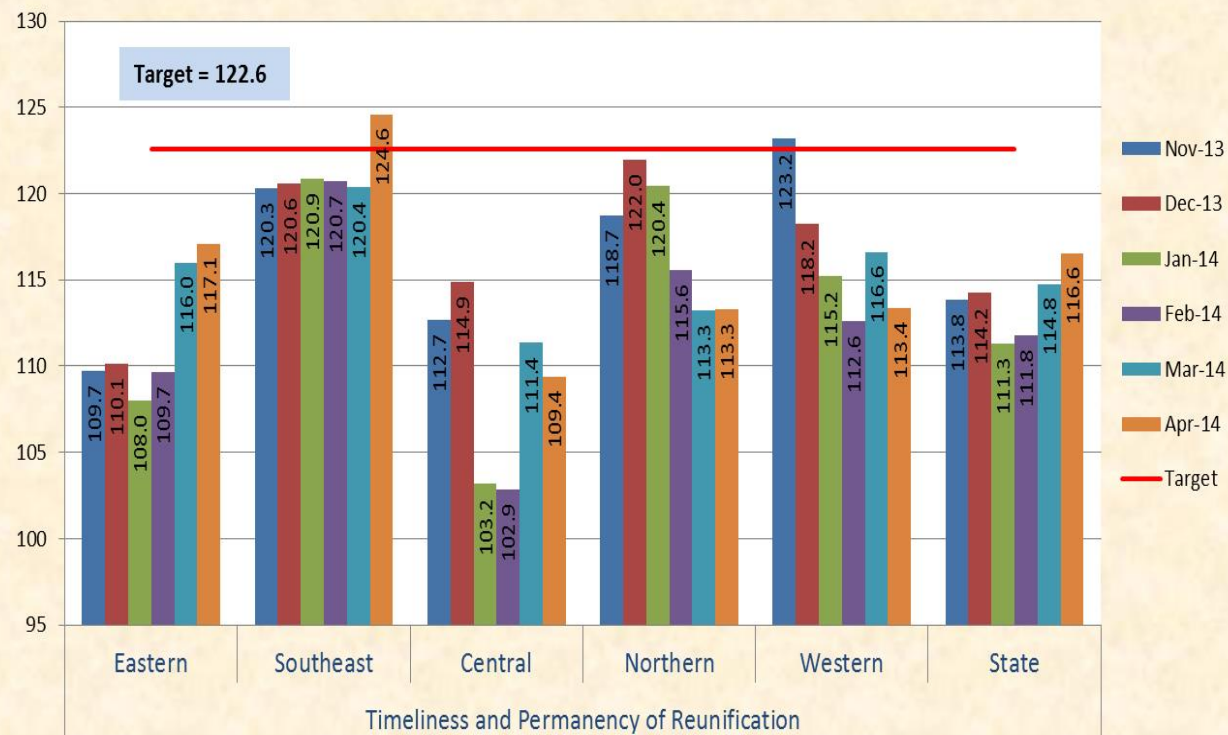*Statewide External Stakeholder Team
*Eastern, Northern, Southeast and Western Service Areas

*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Exits to Reunification - COMPASS Measures

This is a Federal Composite Measure. Data Source: N-FOCUS COMPASS- State Wards. This is a Federal Measure that reports on a rolling 12 month period. For the reporting year, of all children discharged from foster care to reunification who had been in foster care for 8 days or longer, the percent that met either of the following criteria: (1) the child was reunified in less than 12 months from the date of the latest removal from the home, or (2) the child was placed in a trial home visit within 11 months of the date of the latest removal and the child's last placement prior to discharge to reunification was the trial home visit.

Data Review Frequency: Quarterly (March, June, September, December)

Timeliness & Permanency of Reunification

Strengths/Opportunities:

April 2014: Decrease in performance in CSA, while increase in all other Service Areas.

Barriers:

Action Items:

Completed:

- CFS Staff are utilizing Average Number of Out of Home Report to look at length of time and address barriers for youth who are in Out of Home Care for an extended period of time.

- 40 Day Focus Initiatives

- A.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
- B.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

Planned:

-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement.

CQI Team Priority:
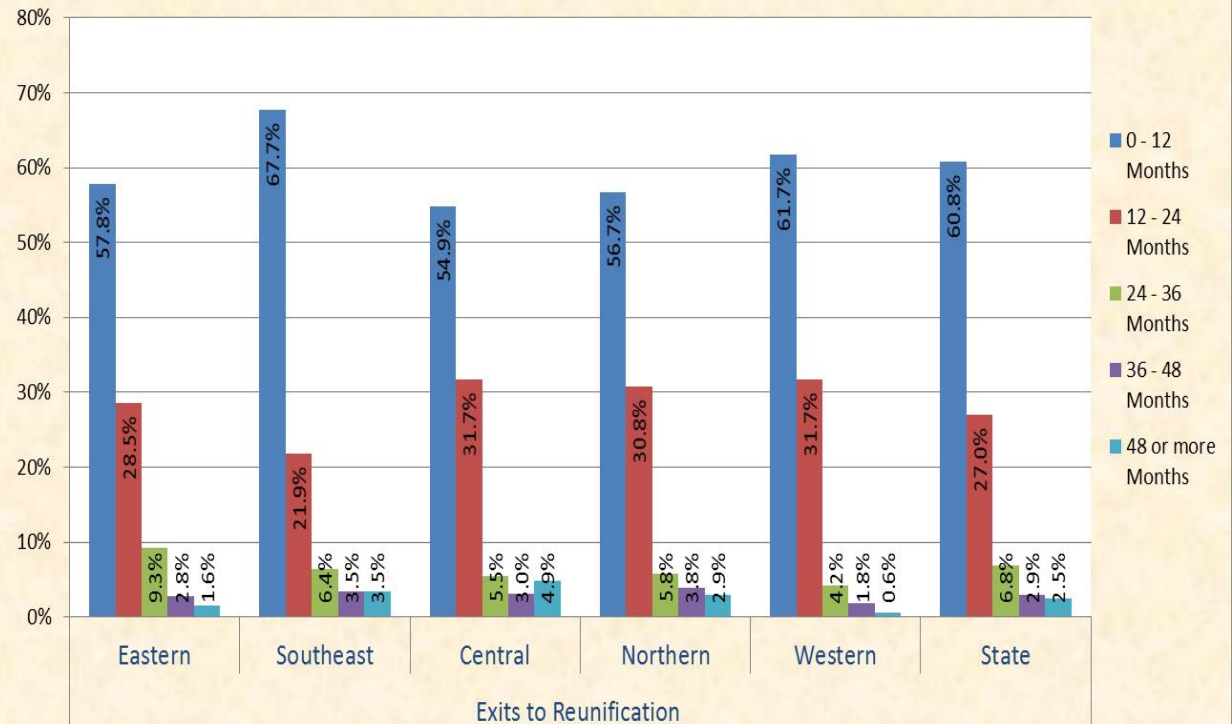
*Statewide External Stakeholder Team
*Eastern, Northern, Southeast and Western Service Areas

Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Exits to Reunification in < 12 Months of First Entry - COMPASS Measures

Target = 48.4%

	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14
Eastern	34.2%	35.0%	35.2%	36.4%	37.8%	39.8%
Southeast	28.2%	31.4%	29.3%	26.6%	27.0%	31.3%
Central	40.8%	39.8%	37.1%	36.4%	39.6%	35.7%
Northern	40.3%	38.3%	36.5%	31.7%	29.3%	32.1%
Western	46.7%	44.9%	38.4%	34.6%	42.1%	43.7%
State	35.8%	35.9%	33.9%	32.5%	34.2%	36.9%

Exits to Reunification in < 12 Months of First Entry

This is a Federal Composite Measure. Data Source: N-FOCUS COMPASS-State Wards. This is a Federal Measure that reports on a rolling 12 month period. For the prior reporting year, of all children entering foster care in the second 6 months of the year who remained in foster care for 8 days or longer, the percent who met either of the following criteria: (1) the child was reunified in less than 12 months from the date of entry into foster care, or (2) the child was placed in a trial home visit in less than 11 months from the date of entry into foster care and the trial home visit was the last placement setting prior to discharge to reunification.

Data Review Frequency: Quarterly (March, June, September, December)

Timeliness & Permanency of Reunification

Strengths/Opportunities:

April 2014: Increase in Median Months in care statewide.

Barriers:

Action Items:
Completed:
- CFS Staff are utilizing Average Number of Out of Home Report to look at length of time and address barriers for youth who are in Out of Home Care for an extended period of time.

- 40 Day Focus Initiatives

  - A.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
  - B.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

Planned:
-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement.

CQI Team Priority:
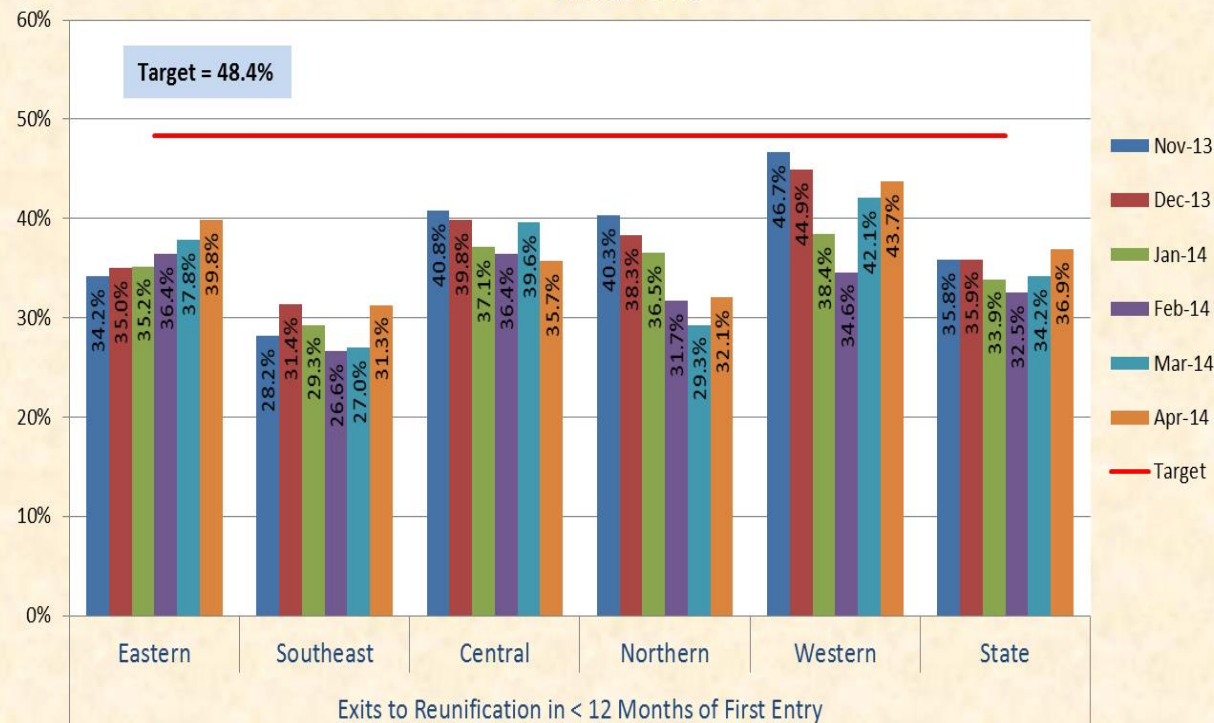*Statewide External Stakeholder Team
*Eastern, Northern, Southeast and Western Service Areas

*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Median Months in Care - COMPASS Measures

Target = 5.40

	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14
Eastern	11.0	10.9	10.9	10.6	9.7	9.8
Southeast	8.5	8.6	8.4	8.4	8.4	8.4
Central	8.6	9.9	10.9	11.5	9.9	10.1
Northern	8.9	8.6	8.4	9.8	9.9	10.0
Western	7.8	8.9	9.7	10.0	9.7	9.9
State	9.4	9.5	9.5	9.5	8.9	8.9

Median Months in Care

A lower score is preferable.

This is a Federal Composite Measure. Data Source: N-FOCUS COMPASS-State Wards. This is a Federal Measure that reports on a rolling 12 month period. For the reporting year, of all children discharged from foster care to reunification who had been in foster care for 8 days or longer, the median length of stay in months from the date of the most recent entry into foster care until either of the following: (1) the date of discharge to reunification; or (2) the date of placement in a trial home visit that exceeded 30 days and was the last placement setting prior to discharge to reunification.

Data Review Frequency: Quarterly (March, June, September, December)

Timeliness & Permanency of Reunification

Strengths/Opportunities:

April 2014: Decrease for ESA, SESA, and NSA. CSA and WSA saw in increase.

Barriers:

Action Items:

Completed:

- CFS Staff are utilizing Average Number of Out of Home Report to look at length of time and address barriers for youth who are in Out of Home Care for an extended period of time.

- 40 Day Focus Initiatives

  - A.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
  - B.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

Planned:

-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement.

CQI Team Priority:

*Statewide External Stakeholder Team

*Eastern, Northern, Southeast and Western Service Areas

*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

ReEntries into Care in < 12 Months of Discharge - COMPASS Measures
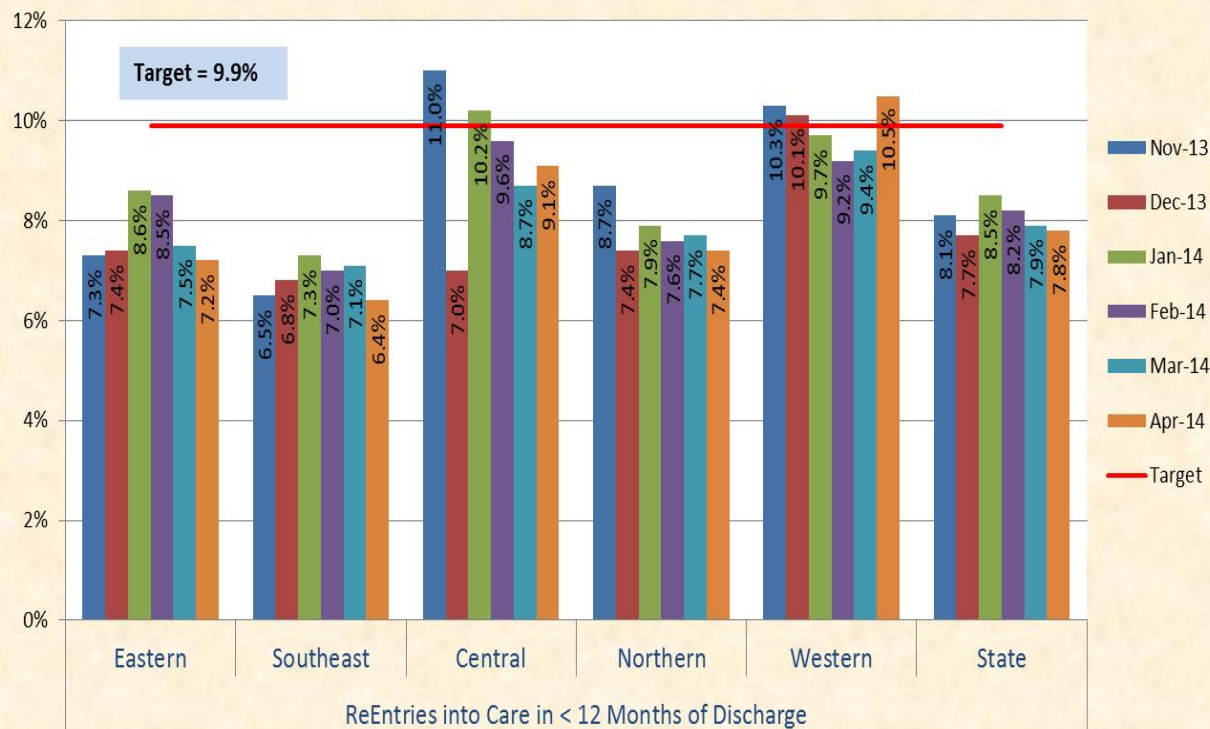
Target = 9.9%

A lower score is preferable.

This is a Federal Composite Measure. Data Source: N-FOCUS COMPASS- State Wards. This is a Federal Measure that reports on a rolling 12 month period. Of all children discharged from foster care to reunification in the year prior to the reporting year, the percent that re-entered foster care in less than 12 months from discharge from a prior episode.

Data Review Frequency: Quarterly (March, June, September, December)

Placement Stability

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Strengths/Opportunities:

April 2014: State performance continues to exceed target goal this month. Northern Service Area continues to exceed the target goal performance continues to increase each month. Increase in all other Service Areas this month.

Barriers:

-Placement disruptions due to child behaviors

-Shortage of foster placements for older youth with behavior needs.

Action Items:

*Completed:

--Southeast and Western Service Areas are utilizing Denials and Disruption Tracking/Database to address placement stability issues/needs. Other Service Areas will be implementing this tracking method in the future. Data from this system is shared with foster care agency providers.

-CQI Team provided additional data to each Service Area regarding placement changes in N-FOCUS.

*Planned:

-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement

CQI Team Priority:
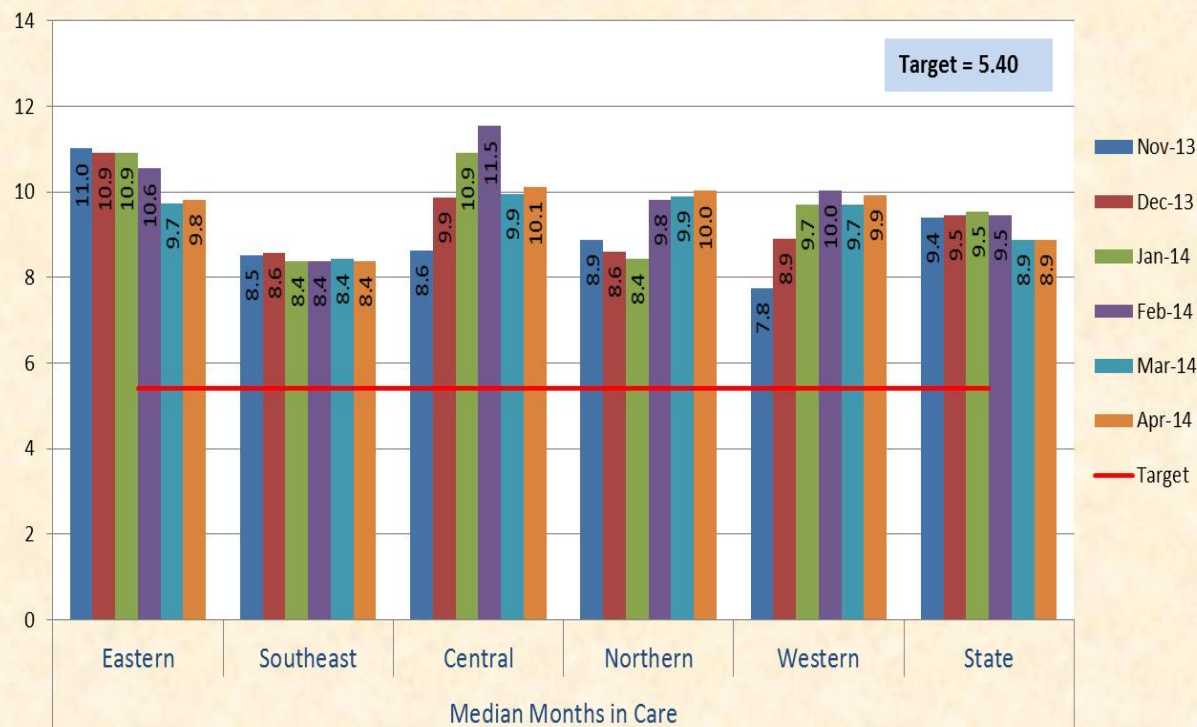
*Statewide External Stakeholder Team
*Eastern, Northern, Southeast and Western Service Areas.

*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

Placement Stability - COMPASS Measures

Target = 101.5

Legend: Nov-13, Dec-13, Jan-14, Feb-14, Mar-14, Apr-14, Target

Area	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14
Eastern	101.6	101.6	102.0	101.3	102.2	103.1
Southeast	98.9	97.4	97.5	98.0	98.9	100.0
Central	98.8	100.0	100.2	101.5	102.2	102.5
Northern	111.1	111.3	110.4	110.4	110.7	111.1
Western	98.1	99.5	97.6	98.6	100.1	101.5
State	101.7	101.7	101.5	101.4	102.1	103.0

Placement Stability

This is the Federal Composite Measure on Placement Stability. This is a Federal Measure that reports on a rolling 12 month period. Data Source: N-FOCUS COMPASS-State wards. The national standard is 2 or fewer placements over specific periods of time. Placements are not counted for children who experience a brief hospitalization or for children who are on runaway status.

Data Review Frequency: Quarterly (March, June, September, December)

Placement Stability

Strengths/Opportunities:
April 2014: SESA, ESA, NSA and WSA continue to exceed the target goal for this measure. CSA saw a slight increase in performance but is still not meeting the goal for this measure.

Barriers:
-Placement disruptions due to child behaviors
-Shortage of foster placements for older youth with behavior needs.

Action Items:
Completed:
-Southeast and Western Service Areas are utilizing Denials and Disruption Tracking/Database to address placement stability issues/needs. Other Service Areas will be implementing this tracking method in the future. Data from this system is shared with foster care agency providers.
-CQI Team provided additional data to each Service Area regarding placement changes in N-FOCUS.
Planned:
-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement

CQI Team Priority:
*Statewide External Stakeholder Team
*Eastern, Northern, Southeast and Western Service Areas.

*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Children in Care for < 12 months (2 or fewer placements) - COMPASS Measures

Target = 86.0%

Legend: Nov-13, Dec-13, Jan-14, Feb-14, Mar-14, Apr-14, Target

Eastern: 89.5%, 90.0%, 89.9%, 89.7%, 90.5%, 90.1%
Southeast: 85.2%, 85.0%, 85.6%, 86.9%, 87.5%, 87.5%
Central: 84.7%, 85.2%, 82.3%, 81.9%, 82.1%, 82.6%
Northern: 94.4%, 93.4%, 92.1%, 92.1%, 91.9%, 91.5%
Western: 88.2%, 89.9%, 87.5%, 89.3%, 91.8%, 93.4%
State: 88.2%, 88.5%, 87.9%, 88.3%, 88.9%, 89.2%

Children in Care for < 12 Months

This is one of three Federal Measures on Placement Stability. This is a Federal Measure that reports on a rolling 12 month period. Data Source: N-FOCUS COMPASS-State wards. Of all children served in foster care during the 12 month target period that were in foster care for at least 8 days but less than 12 months, the percent that two or fewer placement settings.

Data Review Frequency: Quarterly (March, June, September, December)

Placement Stability

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Strengths/Opportunities:

April 2014: SESA, CSA and NSA are meeting the target goal for this measure. ESA and WSA are not meeting this goal but both saw an increase. NSA leads the state at 79.6%.

Barriers:

-Placement disruptions due to child behaviors

-Shortage of foster placements for older youth with behavior needs.

Action Items:

Completed:

-Southeast and Western Service Areas are utilizing Denials and Disruption Tracking/Database to address placement stability issues/needs. Other Service Areas will be implementing this tracking method in the future. Data from this system is shared with foster care agency providers.

-CQI Team provided additional data to each Service Area regarding placement changes in N-FOCUS.

Planned:

-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement
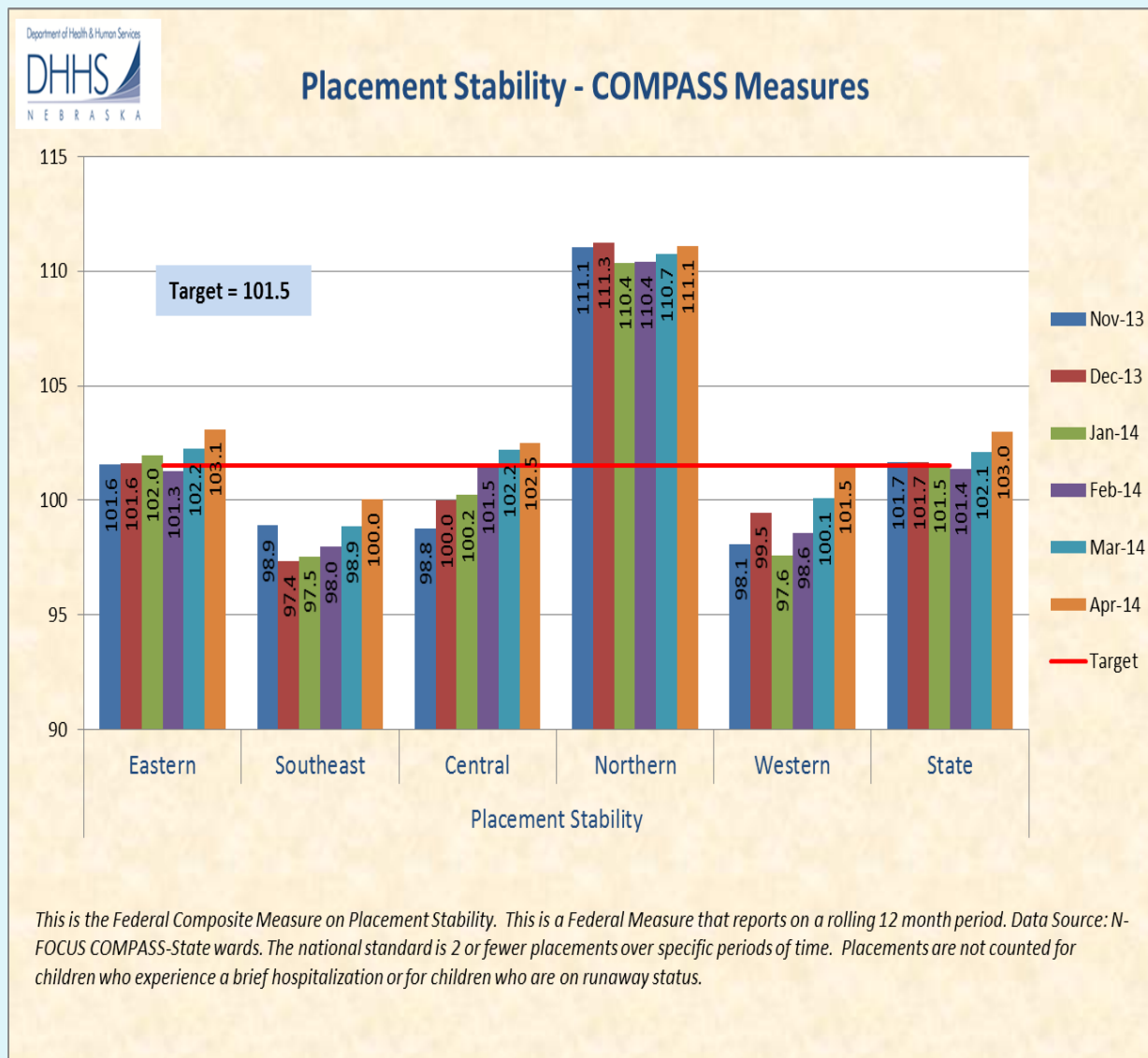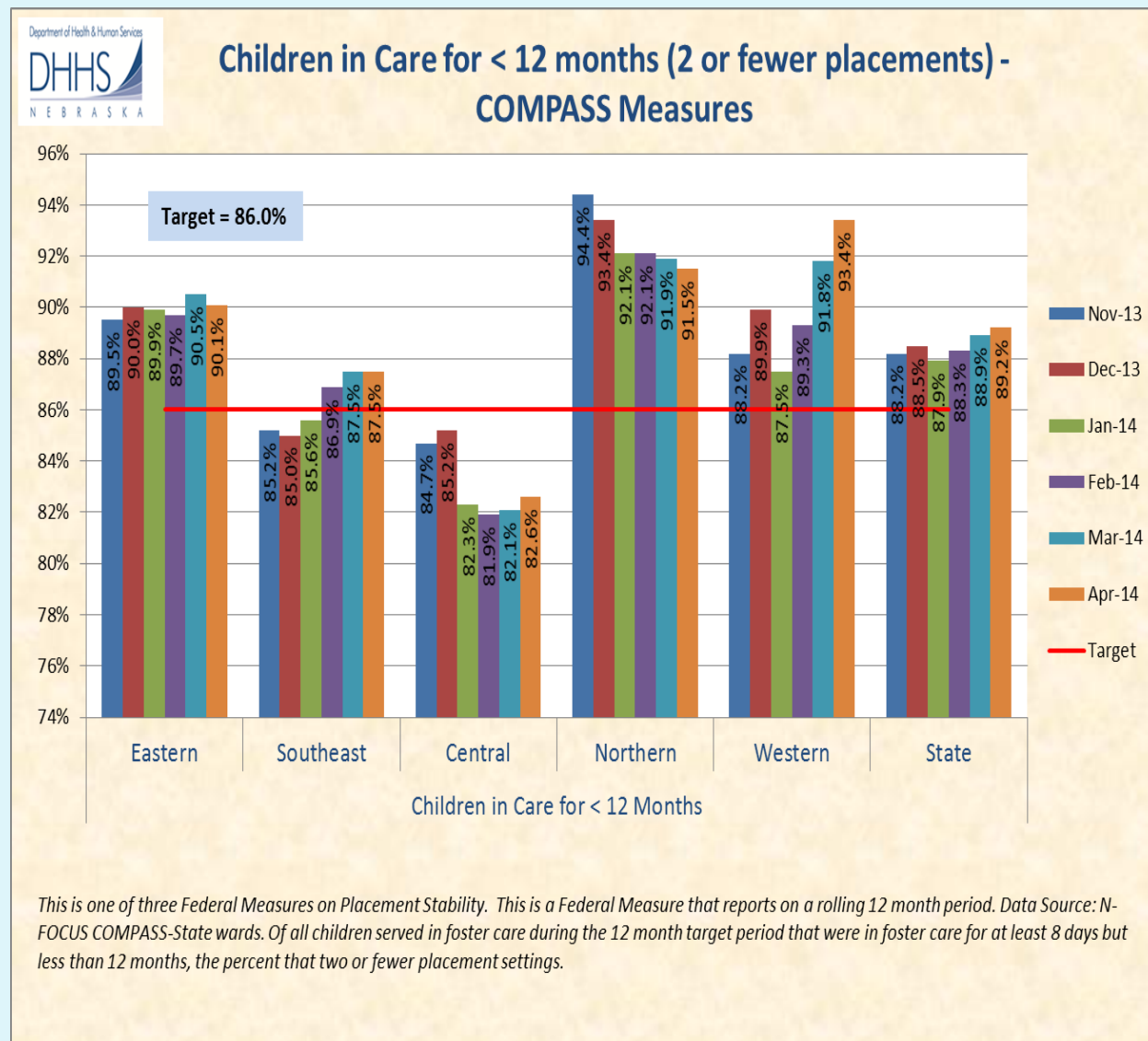
CQI Team Priority:

*Statewide External Stakeholder Team

*Eastern, Northern, Southeast and Western Service Areas.

*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

Department of Health & Human Services

DHHS
N E B R A S K A

Children in Care for 12 - 24 months (2 or fewer placements) - COMPASS Measures

Target = 65.4%

Legend:
- Nov-13
- Dec-13
- Jan-14
- Feb-14
- Mar-14
- Apr-14
- Target

Eastern: 63.0%, 62.4%, 63.0%, 62.4%, 63.8%, 65.3%
Southeast: 67.5%, 64.9%, 64.6%, 63.3%, 64.0%, 67.2%
Central: 65.1%, 66.5%, 69.5%, 70.6%, 71.2%, 70.9%
Northern: 75.5%, 76.7%, 77.0%, 76.7%, 78.6%, 79.6%
Western: 62.2%, 62.5%, 61.0%, 60.9%, 58.9%, 60.2%
State: 66.6%, 66.2%, 66.4%, 66.0%, 66.5%, 68.0%

Children in Care for 12 -24 Months

This is one of three Federal Measures on Placement Stability. This is a Federal Measure that reports on a rolling 12 month period. Data Source: N-FOCUS COMPASS-State wards. Of all children served in fostre care during the 12 month target period that wer in foster care for at least 12 months but less than 24 months, the percent that had two or fewer placement settings.

Data Review Frequency: Quarterly (March, June, September, December)

Placement Stability

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Strengths/Opportunities:
April 2014: CSA continues to exceed the target goal for this measure. Statewide performance is at 38.2% which is below the target goal of 41.8%

Barriers:
-Placement disruptions due to child behaviors
-Shortage of foster placements for older youth with behavior needs.

Action Items:
Completed:
-Southeast and Western Service Areas are utilizing Denials and Disruption Tracking/Database to address placement stability issues/needs. Other Service Areas will be implementing this tracking method in the future. Data from this system is shared with foster care agency providers.
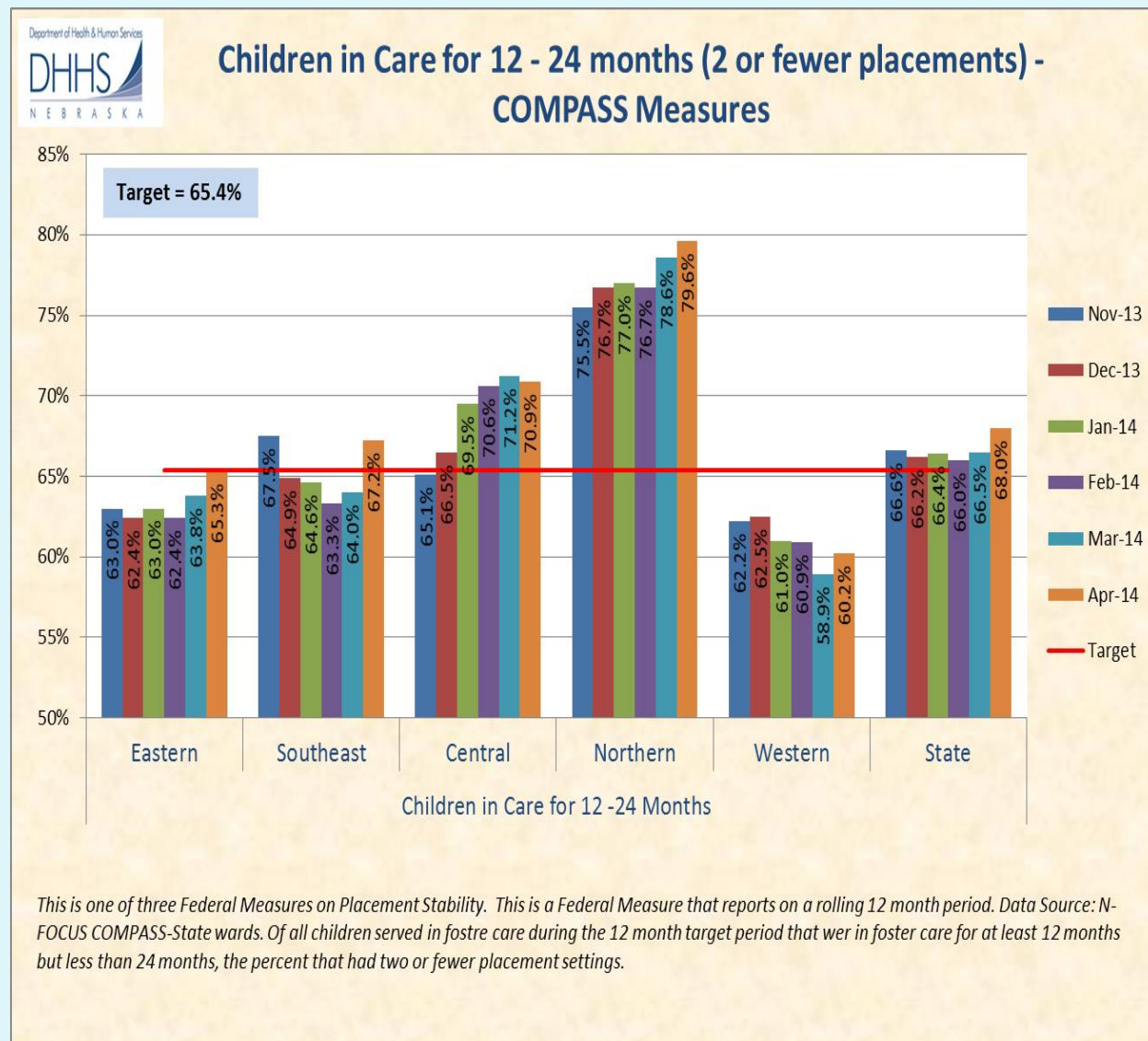-CQI Team provided additional data to each Service Area regarding placement changes in N-FOCUS.
Planned:
-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement

CQI Team Priority:
*Statewide External Stakeholder Team
*Eastern, Northern, Southeast and Western Service Areas.

*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

Children in Care for > 24 months (2 or fewer placements) - COMPASS Measures

Target = 41.8%

	Eastern	Southeast	Central	Northern	Western	State
Nov-13	38.5%	34.5%	37.8%	39.2%	33.1%	37.5%
Dec-13	38.2%	33.9%	38.3%	40.2%	33.1%	37.6%
Jan-14	38.7%	33.7%	40.9%	39.9%	34.5%	38.4%
Feb-14	37.9%	33.8%	43.5%	40.5%	33.6%	38.3%
Mar-14	37.4%	34.2%	44.1%	39.6%	35.2%	38.3%
Apr-14	37.1%	33.5%	44.3%	40.0%	34.1%	38.2%

Children in Care for > 24 Months

This is one of three Federal Measures on Placement Stability. This is a Federal Measure that reports on a rolling 12 month period. Data Source: N-FOCUS COMPASS-State wards. Of all children served in foster care during the 12 month target period that were in foster care for at least 24 months, the percent that had two or fewer placement settings.

Data Review Frequency: Quarterly (March, June, September, December)

Kinship Care for Out of Home Wards

Strengths/Opportunities:
Mar 2014: WSA has the highest percentage of wards placed in kinship care (52.3%). Central has the lowest number of wards in kinship care (38%).

Barriers:

Action Items:
Completed:

Planned:

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Proportion of State Wards Placed in Kinship to Non-Kinship Foster Care by Service Area
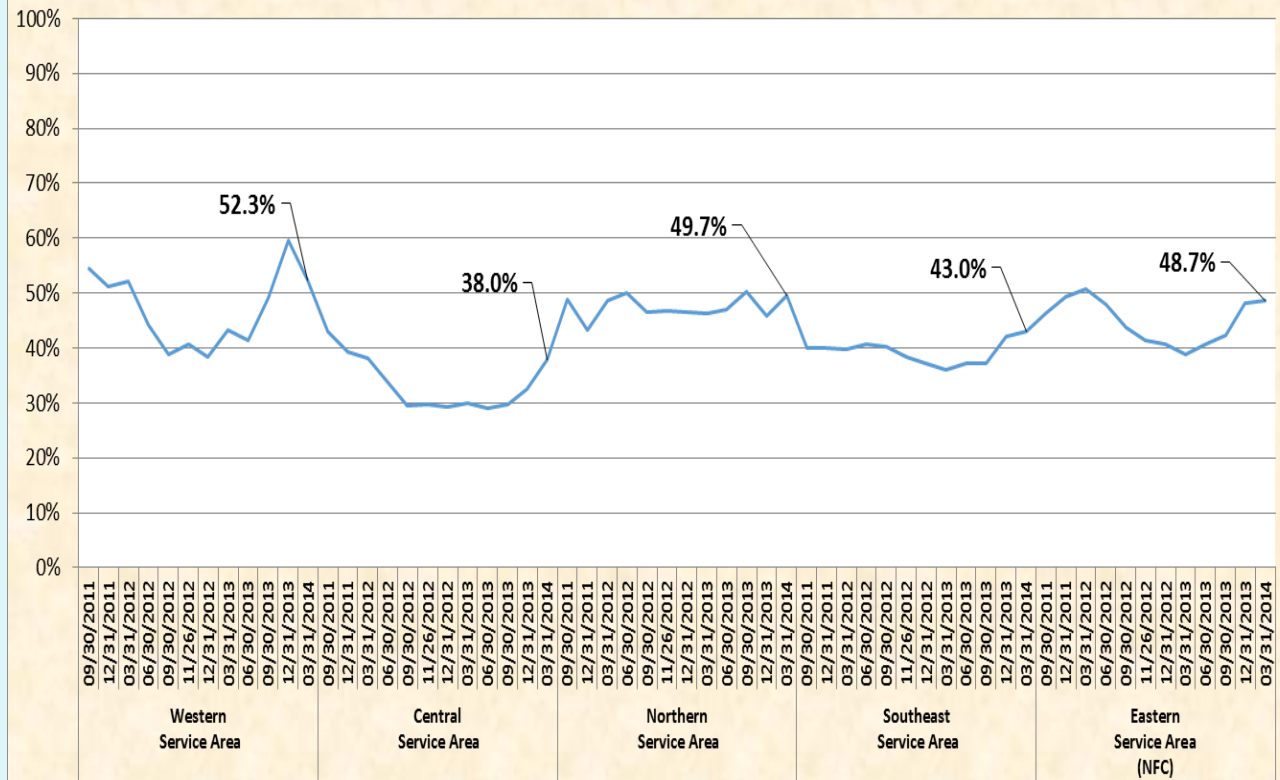
Per LB 265 (July 2013) a "kinship home means a home where a child or children receive foster care and at least one of the primary caretakers has previously lived with or is a trusted adult that has a pre-existing, significant relationship with the child or children or a sibling of such a child or children…."

Data Review Frequency: Quarterly (April, July, November & January)

Safely Decrease the Number of OOH Wards by Moving Them Back to In-Home Care

Strengths/Opportunities:

Barriers:

Action Items:
Completed:
- 40 Day Focus Initiatives
  - A.) All wards living at home 60 days or more. 421 wards achieved permanency as a result of this initiative.
  - B.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
  - C.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

Planned:

CQI Team Priority:
* Statewide

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Data Source: Weekly Point in Time Report

State Wards: In Home/Out of Home
Point in Time

	Jan. '12	Feb. '12	Mar. '12	Apr. '12	May '12	June '12	July '12	Aug. '12	Sept. '12	Oct. '12	Nov. '12	Dec. '12	Jan. '13	Feb. '13	Mar. '13	Apr. '13	May '13	June '13	July '13	Aug. '13	Sep. '13	Oct. '13	Nov. '13	Dec. '13	Jan. '14	Feb. '14	Mar.' 14	Apr.' 14
Wards In Home	1909	1930	1785	1841	1791	1891	1868	1886	1947	1854	1742	1702	1785	1739	1680	1625	1620	1667	1594	1604	1647	1508	1448	1427	1419	1336	1242	1190
Wards Out of Home	4151	4214	4336	4344	4361	4275	4190	4088	3948	3958	4007	3939	3804	3762	3783	3777	3796	3749	3735	3617	3552	3638	3601	3568	3434	3405	3439	3435
Total Wards	6060	6144	6121	6185	6152	6166	6058	5974	5895	5812	5749	5641	5589	5501	5463	5402	5416	5416	5329	5221	5199	5146	5049	4995	4853	4741	4681	4625

Data Review Frequency: Quarterly

Point in time report 4/7/2013 OOH court wards using 2012 Claritas youth population < 19

Safely Decrease the Number of OOH Wards by Moving Them Back to In-Home Care

Strengths/Opportunities:
Mar 2014: WSA has the highest proportion of Out of home wards to in home wards at 81.6%. Southeast has the lowest proportion at 67.4%.

Barriers:

Action Items:
Completed:
- 40 Day Focus Initiatives
  - A.) All wards living at home 60 days or more. 421 wards achieved permanency as a result of this initiative.
  - B.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
  - C.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

Planned:

CQI Team Priority:
* Statewide

OUTCOME STATEMENT: Children Will Achieve Timely Permanency

Proportion of Out of Home to In-Home Wards by Service Area

Data Review Frequency: Quarterly

Point in time report 4/72013 OOH court wards using 2012 Claritas youth population < 19
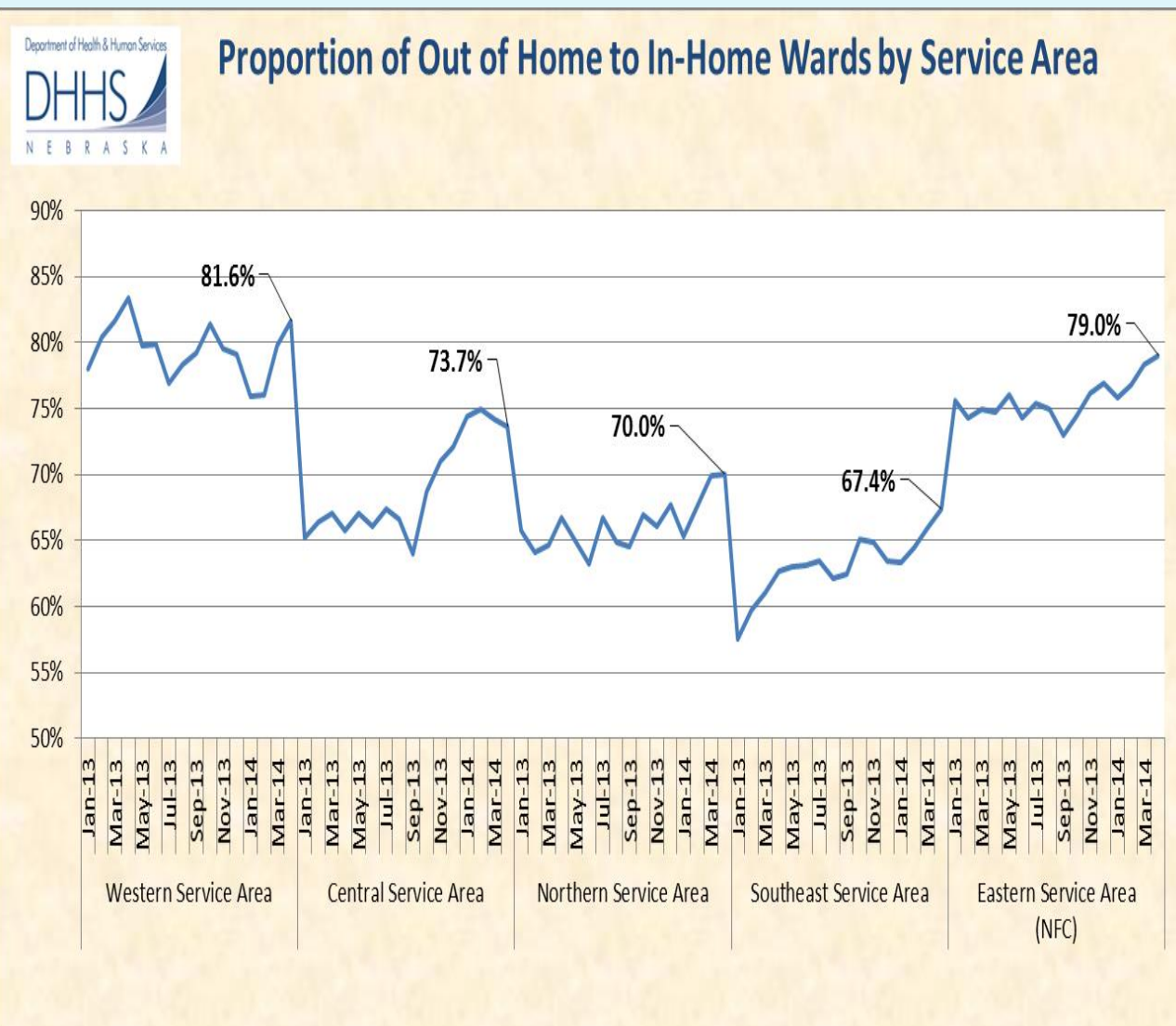
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CHAPTER 4: HEALTHY CHILDREN

OUTCOME STATEMENT: CHILDREN WILL DEMONSTRATE POSITIVE WELL-BEING OUTCOMES

Goal Statement: Children will demonstrate improvements in Physical Health, Behavior Health and in Educational domains

AFCARS
Youth Exiting to Emancipation

Strengths/Opportunities:

FY 2013:

-Overall decrease in the number of wards exiting to emancipation since Federal Fiscal Year 2012 (Decrease of 58 youth).

Barriers:

Action Items:

Completed:

Planned:

Data Review Frequency: Monthly

OUTCOME STATEMENT:　Children Will Demonstrate Positive Well-Being Outcomes

3.4 Exits to Emancipation (%)
Nebraska: 2009, 2010, 2011, 2012, 2013

	2009	2010	2011	2012	2013
Children Age 12 or Younger at Entry	11.8	12.2	11	11.5	8.9
Children Older Than 12 at Entry	88.2	87.8	89	88.5	91.1
Missing Data	0	0	0	0	0
Number	330	304	301	304	246

Emancipation (AFCARS N-FOCUS Definition): Youth who exited out of home care and DHHS custody due to one of the following reasons: "Independent Living Achieved", "Reached the Age of Majority", "Marriage" or "Joined the Military".

Needs and Services for the Child
(Educational Needs – CFSR Item 21)

Strengths/Opportunities:

Note: The CFSR review results are based on a review of N-FOCUS documentation and information obtained during phone interviews with the CFSS or FPS.

Barriers:
- Lack of documentation of efforts address child's poor performance in school.
- Lack of documentation addressing siblings of OJS or 3B youth.

Action Items:

Completed:

Planned:

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Will Demonstrate Positive Well-Being Outcomes

**CFSR Item 21
Educational Needs for the Child**

Department of Health & Human Services
DHHS
NEBRASKA

Legend:
- Oct 2011 - Oct 2012 (n=75)
- Dec 2011 - Dec 2012 (n=150)
- Feb 2012 - Feb 2013 (n=150)
- Oct 2012 - Oct 2013 (n=240)
- Feb 2013 - Feb 2014 (n=240)

Region	Oct 2011-Oct 2012	Dec 2011-Dec 2012	Feb 2012-Feb 2013	Oct 2012-Oct 2013	Feb 2013-Feb 2014
State	82%	79%	89%	97%	93%
Central	100%	76%	88%	94%	93%
Eastern	69%	79%	91%	98%	93%
Northern	73%	86%	90%	97%	100%
Southeast	80%	63%	86%	100%	86%
Western	89%	87%	90%	94%	96%

Item 21 on the CFSR looks at the educational needs and services for the child. This item looks at whether or not the agency sufficiently assessed the educational needs of the child (when applicable) and if the agency made efforts to ensure the appropriate services were provided to the child to meet any identified educational needs.

This data was added to the Statewide CQI packet in March 2014. Note: Item 21 was not reviewed in May 2013 or Dec 2013.

Needs and Services for the Child (Physical Health Needs – CFSR Item 22)

Strengths/Opportunities:

Note: The CFSR review results are based on a review of N-FOCUS documentation and information obtained during phone interviews with the CFSS or FPS.
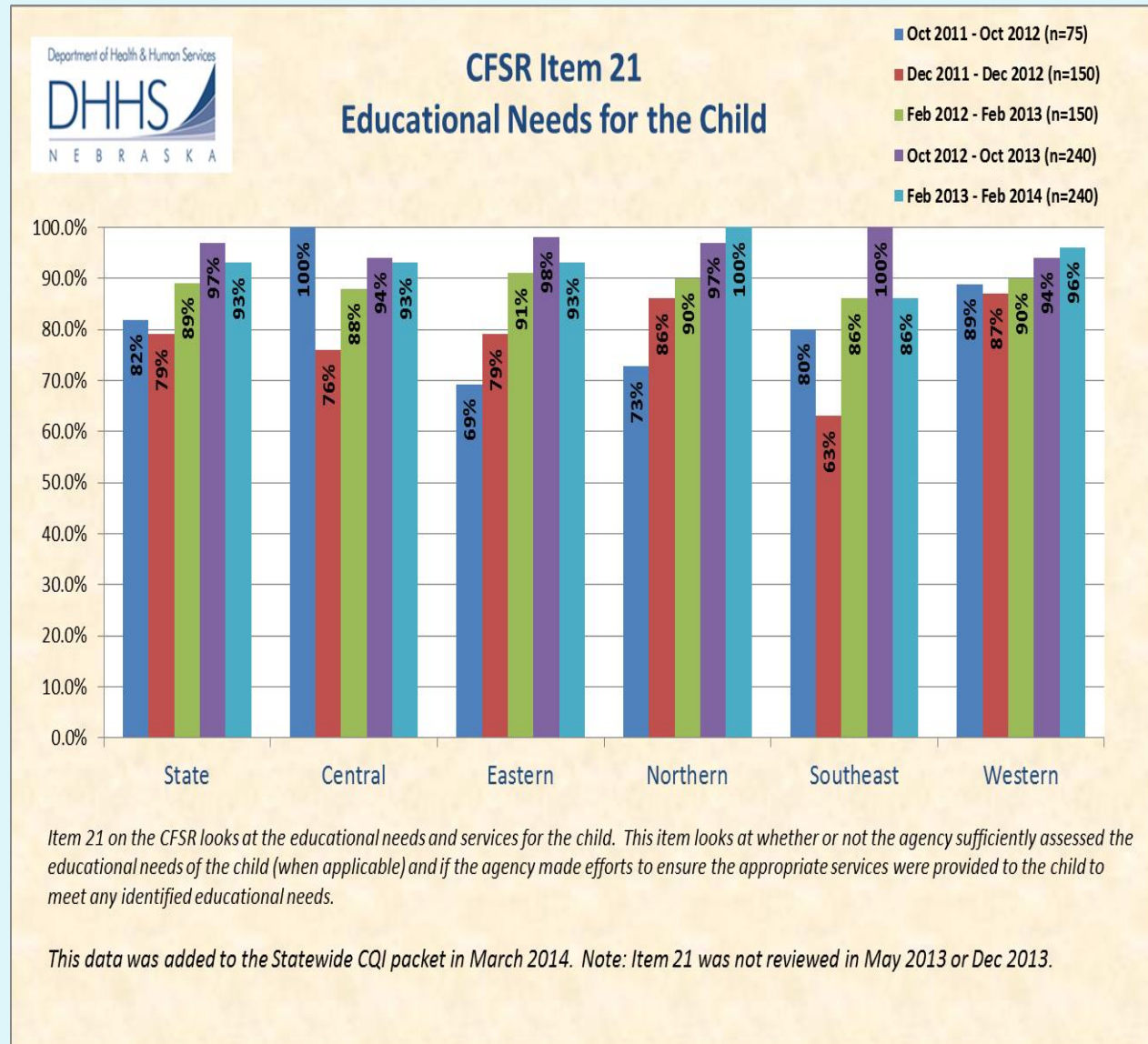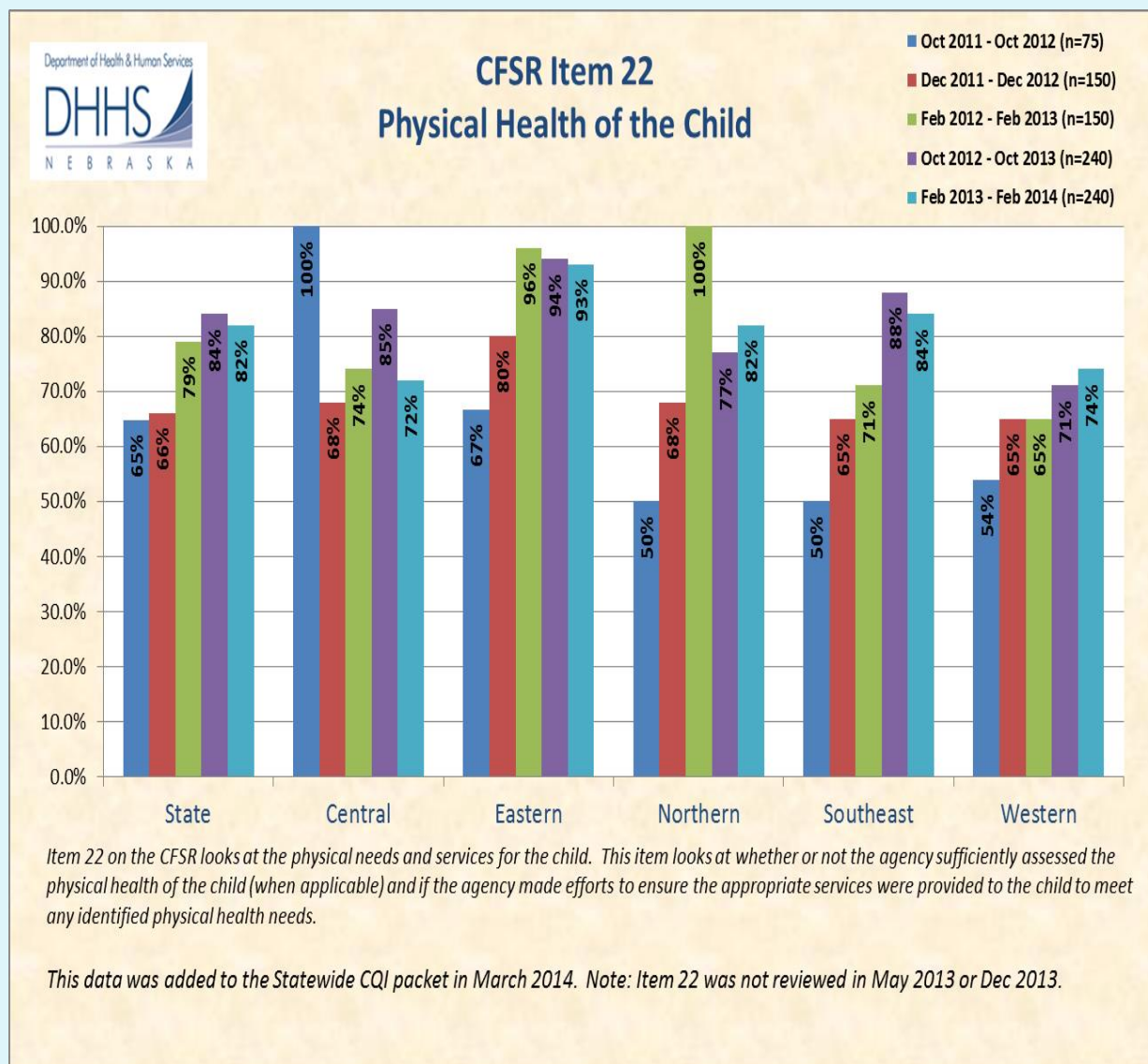
Barriers:

- Out of home Cases: Lack of documentation of a physical or dental exam and/or results from the exam during the PUR.

- In home Cases: Lack of documentation of assessment of physical health for cases that opened in the PUR due to concerns of physical abuse or medical neglect. Lack of documentation addressing siblings of OJS or 3B youth.

Action Items:

Completed:

Planned:

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Will Demonstrate Positive Well-Being Outcomes

Department of Health & Human Services
DHHS
N E B R A S K A

CFSR Item 22
Physical Health of the Child

Legend:
- Oct 2011 - Oct 2012 (n=75)
- Dec 2011 - Dec 2012 (n=150)
- Feb 2012 - Feb 2013 (n=150)
- Oct 2012 - Oct 2013 (n=240)
- Feb 2013 - Feb 2014 (n=240)

Region	Oct 2011-Oct 2012	Dec 2011-Dec 2012	Feb 2012-Feb 2013	Oct 2012-Oct 2013	Feb 2013-Feb 2014
State	65%	66%	79%	84%	82%
Central	100%	68%	74%	85%	72%
Eastern	67%	80%	96%	94%	93%
Northern	50%	68%	100%	77%	82%
Southeast	50%	65%	71%	88%	84%
Western	54%	65%	65%	71%	74%

Item 22 on the CFSR looks at the physical needs and services for the child. This item looks at whether or not the agency sufficiently assessed the physical health of the child (when applicable) and if the agency made efforts to ensure the appropriate services were provided to the child to meet any identified physical health needs.

This data was added to the Statewide CQI packet in March 2014. Note: Item 22 was not reviewed in May 2013 or Dec 2013.

Needs and Services for the Child (Mental/Behavioral Health Needs – CFSR Item 23)

Strengths/Opportunities:

Note: The CFSR review results are based on a review of N-FOCUS documentation and information obtained during phone interviews with the CFSS or FPS.
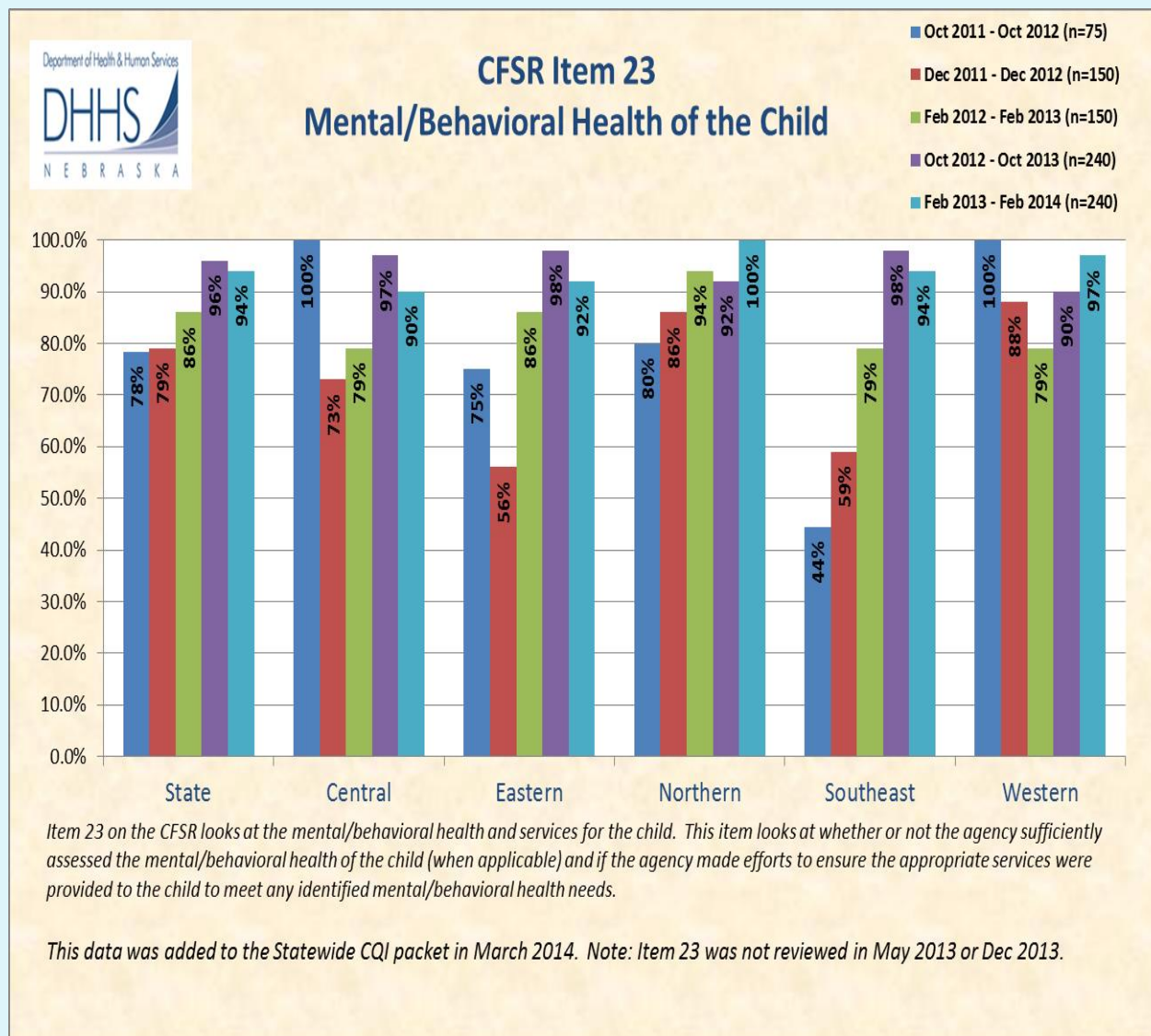
Barriers:

- Out of home Cases: Lack of documentation to support ongoing assessment of child's mental health needs upon return to the parent's home.

- In home Cases: Lack of documentation regarding siblings of OJS or 3B youth to determine if mental health needs are being addressed for those youth.

Action Items:

*Completed:

*Planned:

Data Review Frequency: Monthly

OUTCOME STATEMENT: Children Will Demonstrate Positive Well-Being Outcomes

CFSR Item 23
Mental/Behavioral Health of the Child

Department of Health & Human Services
DHHS
NEBRASKA

Legend:
- Oct 2011 - Oct 2012 (n=75)
- Dec 2011 - Dec 2012 (n=150)
- Feb 2012 - Feb 2013 (n=150)
- Oct 2012 - Oct 2013 (n=240)
- Feb 2013 - Feb 2014 (n=240)

Region	Oct 2011-Oct 2012	Dec 2011-Dec 2012	Feb 2012-Feb 2013	Oct 2012-Oct 2013	Feb 2013-Feb 2014
State	78%	79%	86%	96%	94%
Central	100%	73%	79%	97%	90%
Eastern	75%	56%	86%	98%	92%
Northern	80%	86%	94%	92%	100%
Southeast	44%	59%	79%	98%	94%
Western	100%	88%	79%	90%	97%

Item 23 on the CFSR looks at the mental/behavioral health and services for the child. This item looks at whether or not the agency sufficiently assessed the mental/behavioral health of the child (when applicable) and if the agency made efforts to ensure the appropriate services were provided to the child to meet any identified mental/behavioral health needs.

This data was added to the Statewide CQI packet in March 2014. Note: Item 23 was not reviewed in May 2013 or Dec 2013.

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CHAPTER 5: WORKFORCE STABILITY

OUTCOME STATEMENT: THE DIVISION OF CHILDREN AND FAMILY SERVICES' WORKFORCE IS WELL-QUALIFIED, TRAINED, SUPERVISED AND SUPPORTED

Goal Statement: Build and support a stable workforce to promote positive outcomes for children and families

Caseload Sizes for IA Workers

Strengths/Opportunities:
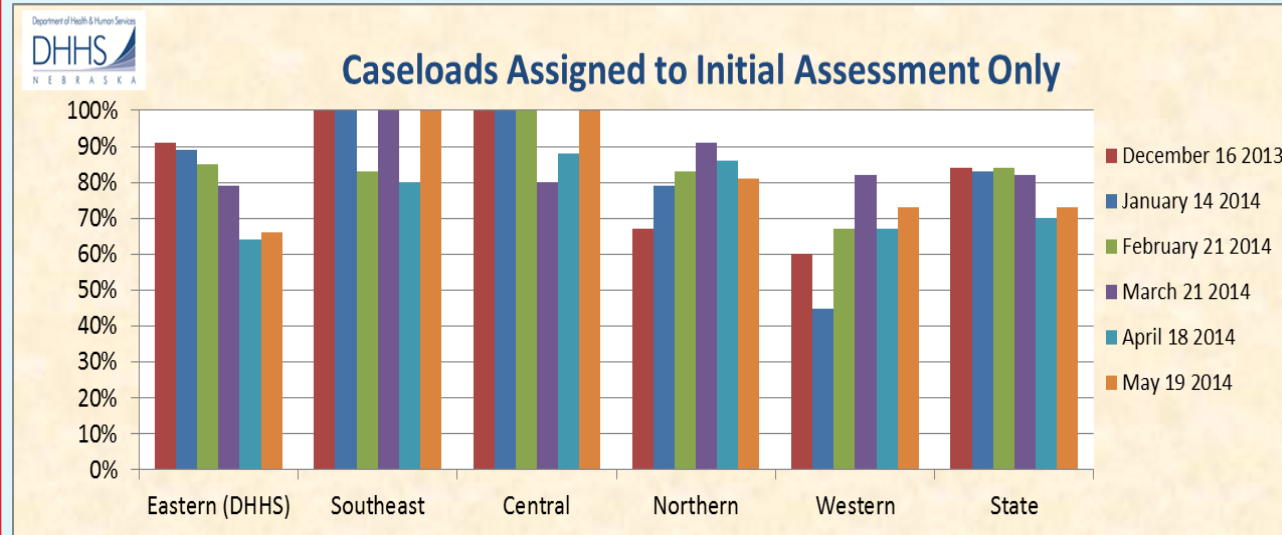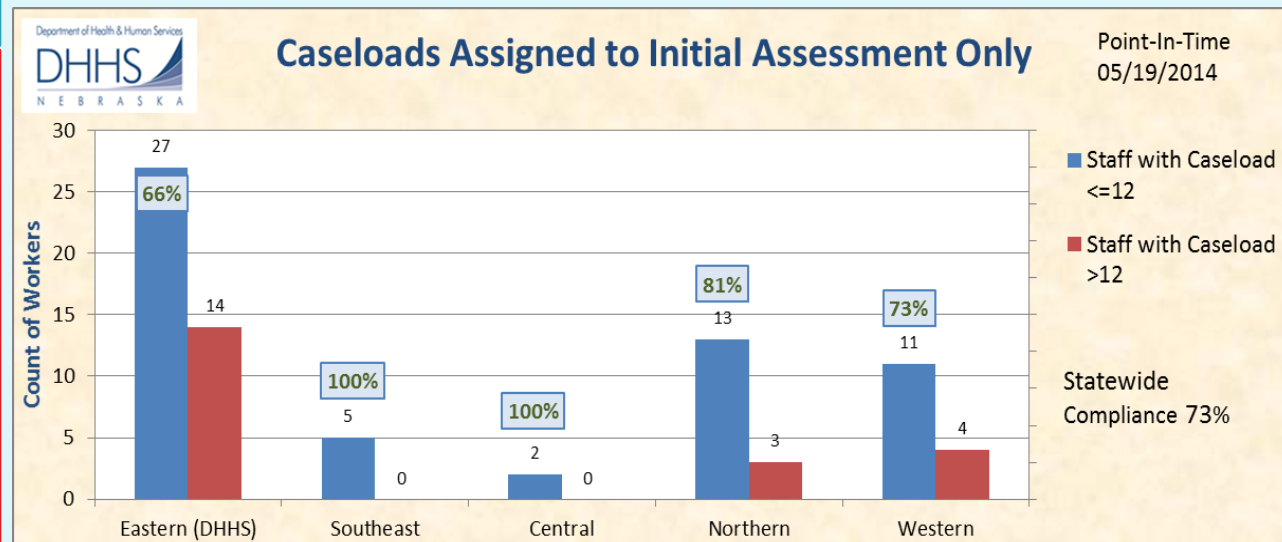May 2014: Highest Compliance in SESA and CSA (100%) and Lowest in ESA (66%).

Barriers:

Action Items:

Completed:

Planned:

Data Review Frequency: Monthly

OUTCOME STATEMENT: The Division of Children and Family Services' Workforce is well-qualified, trained, Supervised and Supported

Caseloads Assigned to Initial Assessment Only

Point-In-Time 05/19/2014

- Staff with Caseload <=12
- Staff with Caseload >12

Statewide Compliance 73%

	Eastern (DHHS)	Southeast	Central	Northern	Western
Staff with Caseload <=12	27 (66%)	5 (100%)	2 (100%)	13 (81%)	11 (73%)
Staff with Caseload >12	14	0	0	3	4

Caseloads Assigned to Initial Assessment Only

- December 16 2013
- January 14 2014
- February 21 2014
- March 21 2014
- April 18 2014
- May 19 2014

Notes:
- _APSS assessments are not included in the IA caseload counts._
- _Decrease in the total number of IA workers in some of the Service Areas is due to some IA workers carrying ongoing Non-Court Involved caseloads._

Caseload Sizes for IA & Ongoing

Strengths/Opportunities:

May 2014: Decrease in statewide compliance to 65%. Highest compliance in NSA and WSA and lowest in CSA.
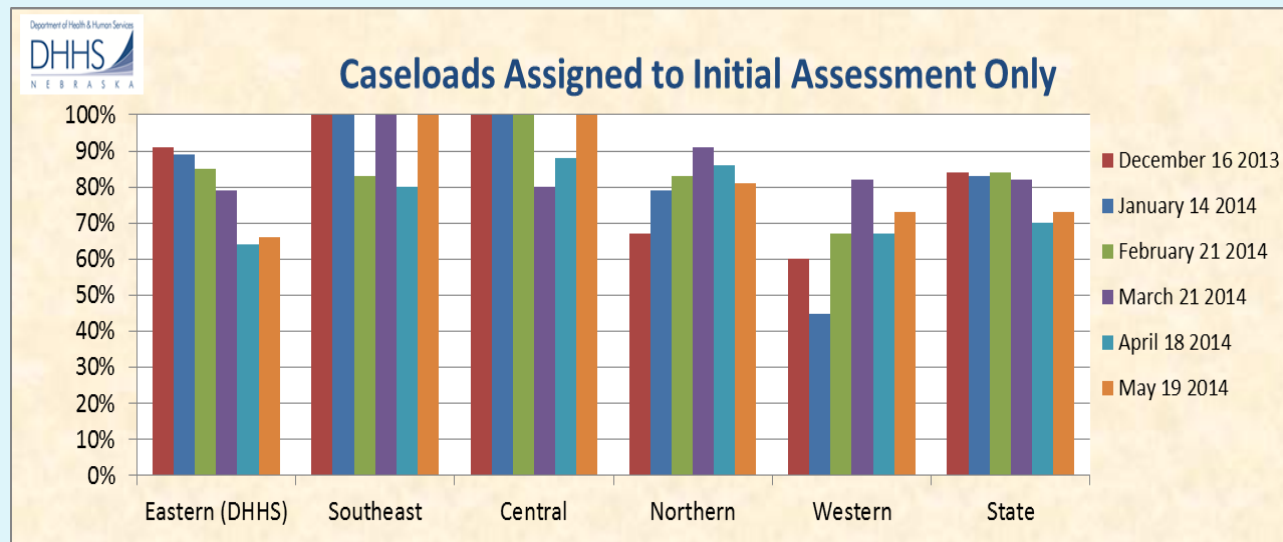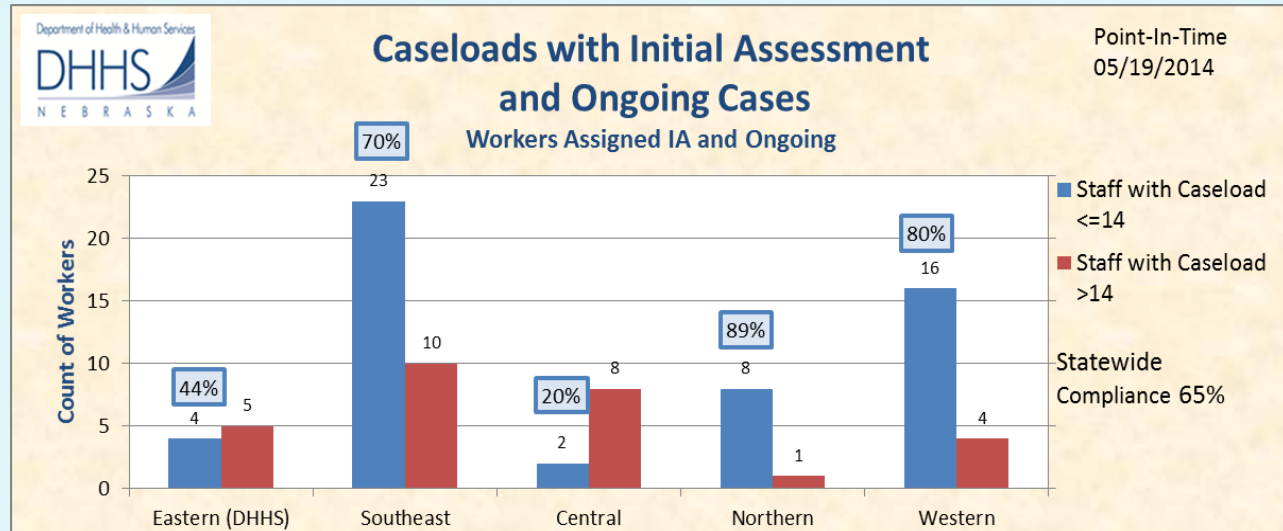
Barriers:

Action Items:

Completed:

Planned:

Data Review Frequency: Monthly

OUTCOME STATEMENT: The Division of Children and Family Services' Workforce is well-qualified, trained, Supervised and Supported

Caseloads with Initial Assessment and Ongoing Cases

Workers Assigned IA and Ongoing

Point-In-Time 05/19/2014

- Staff with Caseload <=14
- Staff with Caseload >14

Statewide Compliance 65%

Region	44%	70%	20%	89%	80%

Eastern (DHHS): 4, 5
Southeast: 23, 10
Central: 2, 8
Northern: 8, 1
Western: 16, 4

Caseloads Assigned to Initial Assessment Only

- December 16 2013
- January 14 2014
- February 21 2014
- March 21 2014
- April 18 2014
- May 19 2014

Regions: Eastern (DHHS), Southeast, Central, Northern, Western, State

Note: APSS assessments are not included in the IA caseload counts.

Caseload Sizes for IH, OOH and Mixed Ongoing

Strengths/Opportunities:
May 2014: Decrease in Statewide Compliance to 77%. Highest compliance in WSA (90%) and lowest compliance in CSA (68%).
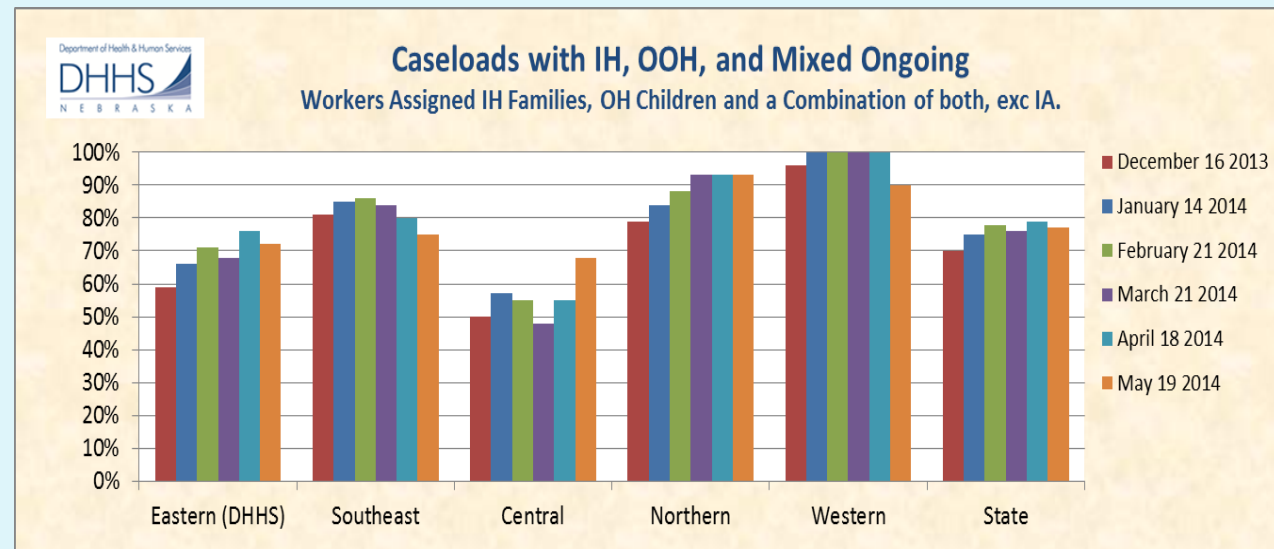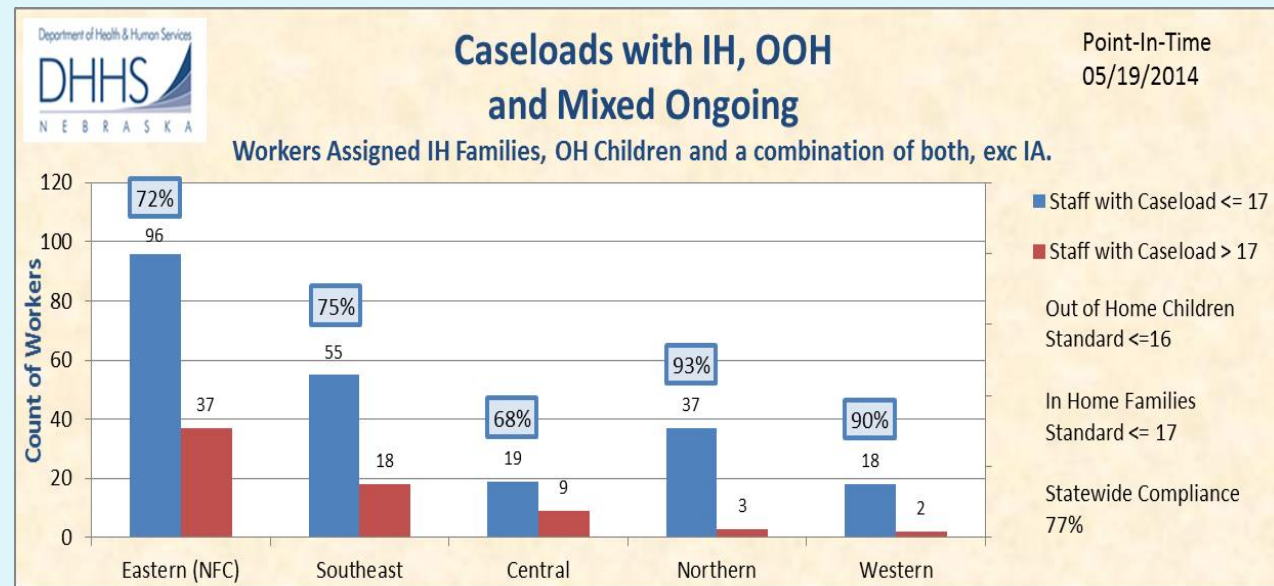
Barriers:

Action Items:
Completed:

Planned:

Data Review Frequency: Monthly

OUTCOME STATEMENT: The Division of Children and Family Services' Workforce is well-qualified, trained, Supervised and Supported

Caseloads with IH, OOH and Mixed Ongoing
Point-In-Time 05/19/2014
Workers Assigned IH Families, OH Children and a combination of both, exc IA.

- Staff with Caseload <= 17
- Staff with Caseload > 17
- Out of Home Children Standard <=16
- In Home Families Standard <= 17
- Statewide Compliance 77%

Region	Staff with Caseload <= 17	Staff with Caseload > 17	%
Eastern (NFC)	96	37	72%
Southeast	55	18	75%
Central	19	9	68%
Northern	37	3	93%
Western	18	2	90%

Caseloads with IH, OOH, and Mixed Ongoing
Workers Assigned IH Families, OH Children and a Combination of both, exc IA.

- December 16 2013
- January 14 2014
- February 21 2014
- March 21 2014
- April 18 2014
- May 19 2014

Caseload Sizes Statewide

Strengths/Opportunities:
May 2014: Statewide Compliance decreased to 74%. Ongoing Only Caseloads have the highest compliance at 77% while Combined IA and Ongoing caseloads have the lowest compliance at 65%.
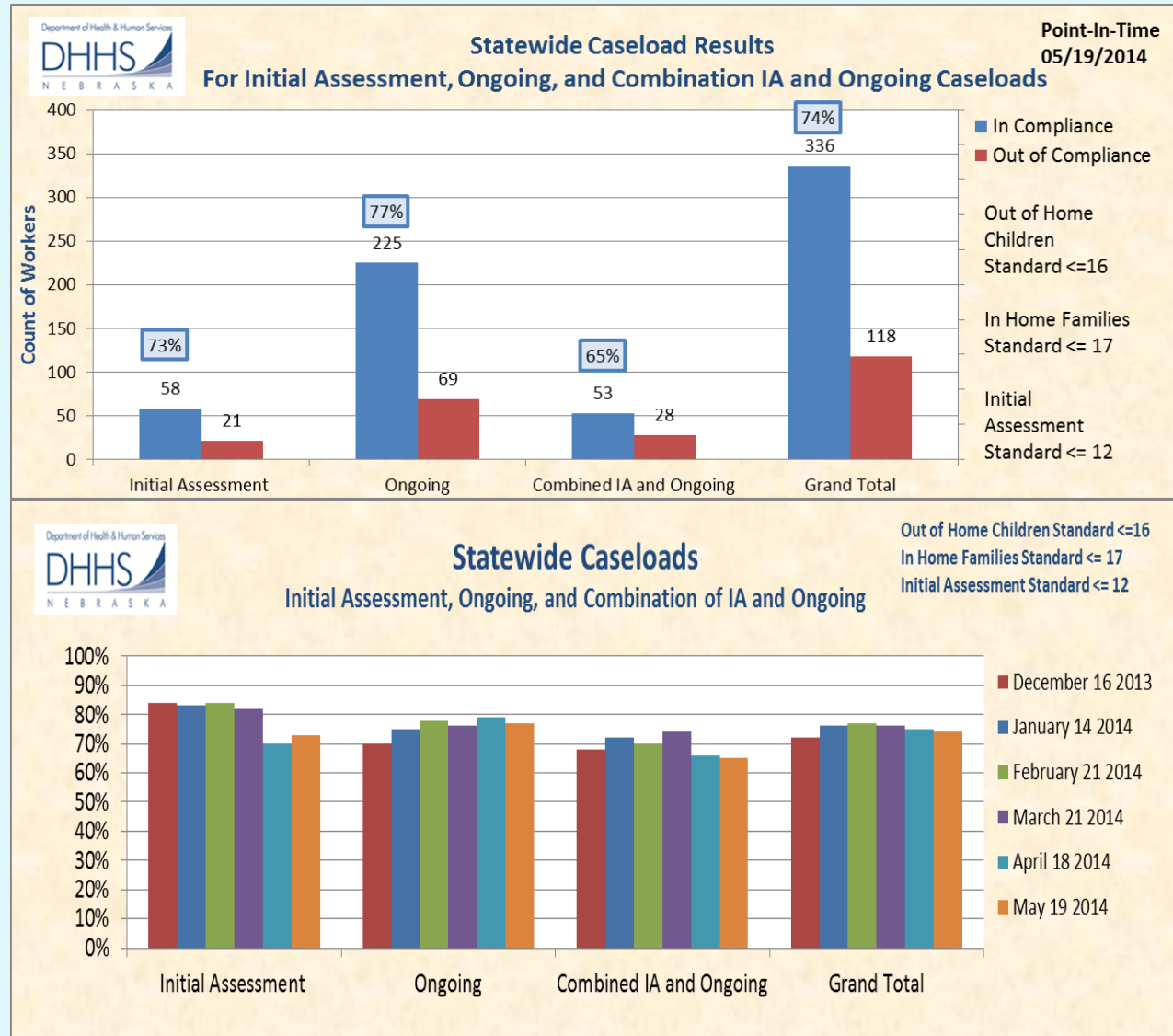
Barriers:

Action Items:
Completed:

Planned:

Data Review Frequency: Monthly

OUTCOME STATEMENT: The Division of Children and Family Services' Workforce is well-qualified, trained, Supervised and Supported

DHHS NEBRASKA — Department of Health & Human Services

Statewide Caseload Results
For Initial Assessment, Ongoing, and Combination IA and Ongoing Caseloads

Point-In-Time
05/19/2014

Legend:
- In Compliance
- Out of Compliance

Out of Home Children Standard <=16
In Home Families Standard <= 17
Initial Assessment Standard <= 12

Count of Workers:
- Initial Assessment: 73% — In Compliance 58, Out of Compliance 21
- Ongoing: 77% — In Compliance 225, Out of Compliance 69
- Combined IA and Ongoing: 65% — In Compliance 53, Out of Compliance 28
- Grand Total: 74% — In Compliance 336, Out of Compliance 118

DHHS NEBRASKA — Department of Health & Human Services

Statewide Caseloads
Initial Assessment, Ongoing, and Combination of IA and Ongoing

Out of Home Children Standard <=16
In Home Families Standard <= 17
Initial Assessment Standard <= 12

Legend:
- December 16 2013
- January 14 2014
- February 21 2014
- March 21 2014
- April 18 2014
- May 19 2014

Categories: Initial Assessment, Ongoing, Combined IA and Ongoing, Grand Total

Note: APSS assessments are not included in the IA caseload counts.

CFS Staff Vacancy Rate

Strengths/Opportunities:
May 2014: Increase to 9.8% this month.
SESA has the highest number of
vacancies (13.2%).

Barriers:

Action Items:
Completed:

Planned:

OUTCOME STATEMENT: The Division of Children and Family Services' Workforce is well-qualified, trained, Supervised and Supported

CFSS + CFSS/T

Location	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14
Central Service Area	12.1%	8.9%	5.3%	6.9%	5.2%	8.8%	10.9%	7.3%	9.4%	1.9%	2.0%	0.0%	2.0%	11.8%
Eastern Service Area	5.6%	6.5%	3.7%	3.7%	3.7%	6.5%	8.3%	8.3%	7.5%	10.4%	10.5%	14.3%	14.3%	11.2%
Northern Service Area	10.8%	13.3%	9.6%	12.0%	16.9%	20.5%	18.1%	8.9%	5.1%	5.3%	4.1%	2.8%	2.8%	7.0%
Southeast Service Area	5.3%	5.9%	6.2%	1.8%	1.9%	6.2%	6.2%	3.1%	2.6%	5.2%	2.8%	6.3%	9.8%	13.2%
Western Service Area	2.8%	1.4%	4.3%	7.0%	9.9%	12.7%	7.0%	8.5%	0.0%	4.8%	4.8%	0.0%	1.7%	0.0%
Total	6.7%	7.0%	5.8%	5.4%	6.4%	10.0%	9.4%	6.6%	4.6%	6.0%	5.1%	6.0%	7.7%	9.8%

YSS I

Location	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Aug-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14
YRTC Geneva	20.0%	20.0%	20.0%	10.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	10.0%	10.0%	10.0%
YRTC Kearney	0.0%	0.0%	0.0%	7.1%	14.3%	6.7%	6.7%	13.3%	14.3%	13.3%	12.5%	6.7%	13.3%	20.0%
Total	8.3%	8.3%	8.3%	8.3%	8.3%	4.0%	4.0%	8.0%	8.3%	8.0%	7.7%	8.0%	12.0%	16.0%

YSS II

Location	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Aug-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14
YRTC Geneva	6.7%	16.7%	13.3%	6.7%	10.0%	6.7%	6.7%	6.7%	3.3%	16.7%	10.0%	16.7%	16.7%	13.3%
YRTC Kearney	15.7%	8.0%	15.7%	17.6%	21.6%	28.0%	30.6%	26.5%	26.0%	21.7%	17.4%	6.5%	19.6%	13.0%
Total	12.3%	11.3%	14.8%	13.6%	17.3%	20.0%	21.5%	19.0%	17.5%	19.7%	14.5%	10.5%	18.4%	13.2%

*Date is effective as of first day of posted month

Data Review Frequency: Quarterly

Vacancies are allocated positions not filled, excluding frozen positions

NFC Staff Vacancy Rate

Strengths/Opportunities:
Apr 2014: NFC Vacancy Rate decreased from 10% to 8% this month.

Barriers:

Action Items:
Completed:

Planned:

OUTCOME STATEMENT: The Division of Children and Family Services' Workforce is well-qualified, trained, Supervised and Supported

VACANCY RATES

Location	Dec 13**			Jan 14**			Feb 14**			Mar14**			Apr14**		
	Vacant Positions	Total Positions	Vacancy Rate	Vacant Positions	Total Positions	Vacancy Rate	Vacant Positions	Total Positions	Vacancy Rate	Vacant Positions	Total Positions	Vacancy Rate	Vacant Positions	Total Positions	Vacancy Rate
NFC**	17***	168	10.11%	14***	168	8.33%	19***	168	11.30%	17***	168	10.11%	14***	168	8.33%

**includes Family Permanency Supervisors and Family Permanency Specialists (based on 148 fully trained Family Permanency Specialists and 20 Family Permanency Supervisors)

***This does not include the Family Permanency Specialist Trainees|

Data Review Frequency: Quarterly

CFS Staff Turnover

Strengths/Opportunities:
Apr 2014: 10 CFS Specialists, 1 Trainee and 1 Supervisor left DHHS Employment this month.

Barriers:

Action Items:

Completed:

Planned:

OUTCOME STATEMENT: The Division of Children and Family Services' Workforce is well-qualified, trained, Supervised and Supported

Protection and Safety Turnover Percent*

Title	Apr 2013	May 2013	June 2013	July 2013	Aug 2013	Sept 2013	Oct 2013	Nov 2013	Dec 2013	Jan 2014	Feb 2014	Mar 2014	Apr 2014
CFS Spec Trainee	1.89%	1.89%	6.12%	7.32%	14.29%	5.13%	4.26%	4.88%	5.56%	3.33%	0.00%	0.00%	6.25%
CFS Specialist	1.26%	1.99%	2.21%	2.21%	3.03%	1.01%	1.78%	1.54%	0.00%	2.63%	1.81%	1.32%	2.71%
CFS Supervisors	1.32%	1.32%	2.74%	2.82%	2.90%	0.00%	0.00%	0.00%	0.00%	0.00%	1.50%	0.00%	1.47%

Turnover Percent　　April 2014

Title	CSA PS	ESA PS	NSA PS	SESA PS	WSA PS
CFS Spec Trainee	33.33%	0.00%	0.00%	0.00%	0.00%
CFS Specialist	2.44%	2.26%	3.17%	2.50%	3.57%
CFS Supervisors	0.00%	0.00%	8.47%	0.00%	0.00%

Turnover Counts　　April 2014

Title	CSA PS	ESA PS	NSA PS	SESA PS	WSA PS
CFS Spec Trainee	1	0	0	0	0
CFS Specialist	1	2	2	3	2
CFS Supervisors	0	0	1	0	0

Aggregate Counts

Title	Total Employe	Term Employe	Turnover
CFS Spec Trainee	16	1	6.25%
CFS Specialist	368.5	10	2.71%
CFS Supervisors	67.8	1	1.47%

*Note: Turnover rates are calculated using filled positions at the end of the month and includes only those employees who left DHHS employment during that month. It does not include employees who transferred from one program or Division to another within DHHS. Turnover is as of the last day of posted month.

Data Review Frequency: Quarterly

NFC Staff Turnover

Strengths/Opportunities:
Apr 2014: Decrease in turnover for FPS.

Barriers:

Action Items:
Completed:

Planned:

OUTCOME STATEMENT: The Division of Children and Family Services' Workforce is well-qualified, trained, Supervised and Supported

NEBRASKA FAMILIES COLLABORATIVE TURNOVER PERCENT*												
Title	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14
FPS Trainee	14.20%	0%	0	0%	0%	9.09%	0%	8.33%	9.09%	5.88%	0%	0%
FPS	2.16%	4.44%	5.22%	4.69%	11.21%	3.33%	2.36%	3.88%	3.73%	3.88%	3.05%	2.23%
FP Supervisor	0%	0%	4.76%	4.54%	5%	0%	0%	0%	5.55%	0%	0%	0%

*Note: Turnover rates are calculated using filled positions at the end of the month and includes only those employees who left state government during that month. It does not include employees who transferred from one program or Division to another within DHHS or from DHHS to another state agency. Turnover is as of the last day of posted month.

Aggregate Counts – Apr 2014			
Title	Total Employees	Term Employees	Turnover
FPS Trainee	6	0	0%
FPS	134	3	2.23%
FP Supervisor	20	0	0%

Data Review Frequency: Quarterly

YRTC Staff Turnover

Strengths/Opportunities:
Apr 2014: Increase in YSS I turnover.

Barriers:

Action Items:
Completed:

Planned:

OUTCOME STATEMENT: The Division of Children and Family Services' Workforce is well-qualified, trained, Supervised and Supported

YRTC Turnover Percent*

Title	Apr 2013	May 2013	June 2013	July 2013	Aug 2013	Sept 2013	Oct 2013	Nov 2013	Dec 2013	Jan 2014	Feb 2014	Mar 2014	Apr 2014
YOUTH SECURITY SPECIALIST I	4.76%	0.00%	2.35%	4.75%	0.00%	0.00%	4.64%	4.87%	0.00%	2.35%	3.44%	2.35%	9.62%
YOUTH SECURITY SPECIALIST II	0.00%	4.38%	2.84%	6.01%	6.37%	7.78%	0.00%	3.10%	5.00%	2.84%	1.49%	3.26%	1.53%

Turnover Percent Apr 2014

Title	Geneva	Kearney
YOUTH SECURITY SPECIALIST I	0.00%	16.67%
YOUTH SECURITY SPECIALIST II	0.00%	2.50%

Turnover Counts Apr 2014

Title	Geneva	Kearney
YOUTH SECURITY SPECIALIST I	0	2
YOUTH SECURITY SPECIALIST II	0	1

Aggregate Counts

Title	Total Employe	Term Employe	Turnover
YOUTH SECURITY SPECIALIST I	20.8	2	9.62%
YOUTH SECURITY SPECIALIST II	65.30	1	1.53%

*Note: Turnover rates are calculated using filled positions at the end of the month and includes only those employees who left DHHS employment during that month. It does not include employees who transferred from one program or Division to another within DHHS. Turnover is as of the last day of posted month.

Data Review Frequency: Quarterly

CHAPTER 6: ORGANIZATIONAL EXCELLENCE

OUTCOME STATEMENT: DCFS IS A SELF-DIAGNOSING AND SELF-CORRECTING SYSTEM

Goal Statement: Quantitative and qualitative data measures will be used to evaluate and improve performance, guide decision-making, enhance transparency and strengthen accountability

Schedule of Discussion Subjects 2014

- January 23 – ½ day CQI then Stakeholder CQI
  - Process Measures
  - Federal Results (COMPASS)
  - Intake / SDM Fidelity
  - Dictation Update
  - Barriers to Permanency
  - Quality Case-management discussion
- February 27
  - Process Measures
  - Intake / SDM Fidelity
  - Caseload/Turnover/Vacancy
  - Operations Data
  - Non-Court Data Discussion
  - Quality Case-management discussion
- March 27
  - Process Measures
  - Intake / SDM Fidelity
  - Quality Case-management discussion
  - ESA Local CQI Update
  - SESA SDM Process Improvements
- April 24 - ½ day CQI then Stakeholder CQI
  - Process Measures
  - Intake / SDM Fidelity
  - Federal Results (COMPASS)
  - Quality Case-management discussion
- May 29
  - Process Measures
  - Intake / SDM Fidelity
  - Turnover/Vacancy
  - Caseload/Turnover/Vacancy
  - Quality Case-management discussion
  - NSA Local CQI Update
- June 26
  - Process Measures
  - Intake / SDM Fidelity
  - Local CQI Update
  - Ward Count Review
  - SESA Local CQI Update
  - Quality Case-management discussion

- July 24 - ½ day CQI then Stakeholder CQI
  - Process Measures
  - Federal Results (COMPASS)
  - Intake / SDM Fidelity
  - Operations Data
  - Quality Case-management discussion
- August 28
  - Process Measures
  - Intake / SDM Fidelity
  - Caseload/Turnover/Vacancy
  - WSA Local CQI Update
  - Quality Case-management discussion
- September 25
  - Process Measures
  - NSA CQI Discussion
  - Intake / SDM Fidelity
  - LB-1160 Survey results
  - Quality Case-management discussion
- October 23 - ½ day CQI then Stakeholder CQI
  - Process Measures
  - Operations Data
  - Intake / SDM Fidelity
  - Federal Results (COMPASS)
  - Quality Case-management discussion
  - CSA Local CQI Update
- November 20
  - Process Measures
  - Intake / SDM Fidelity
  - CSA CQI Discussion
  - SDM Fidelity
  - Quality Case-management discussion

- December
  - No Meeting this month

Federal IM 12-07

- **CQI Structure**
  - **Statewide Quality Assurance program with autonomous oversight and dedicated staff**
  - **Continual training of CQI staff is occurring and QA is collaboratively working with Policy, Training and Administrators to ensure QA's decisions are based upon common policy and to help policy with Administrator's situations**
  - **Written policies and procedures are being updated and produced where they don't exist**
- **Quality Data Collection**
  - **Common data collection and measuring process statewide**
  - **All QA staff are trained and utilize the same QA Tools**
  - **CFSR reviews are performed by the same staff and reported consistently**
  - **2nd level reviews occur on all processes to ensure consistent QA and learning opportunities**
- **Case Record Review Data and Process**
  - **Quality unit is responsible for all case reviews**
  - **Case review system has been developed to randomly select cases statewide, provide the QA person with correct review questions and stores results in a non-editable location.**
  - **Case review system has been modified to allow for testing of specific CFSR questions by service area as needed and generate an email to the worker.**
  - **Inter-rater reliability testing is ongoing to ensure consistent scoring.**
- **Analysis and Dissemination of Quality Data**
  - **Statewide case review system has been developed to review all cases selected for review**
  - **Data is reported statewide and by service area**
  - **An extensive array of performance reports are created and distributed at monthly CQI meeting**
- **Feedback to Stakeholders**
  - **Results are used to inform training, policy, stakeholders, community partnerships and others as a means to identify and communicate improvement opportunities and areas of strength**
  - **Supervisors and field staff understand how results link to daily casework practices; results are used by supervisors and field leadership to assess and improve practice.**
  - **First stage of CQI communications is monthly Statewide CQI meeting. Second stage of CQI communications is local CQI meetings. At the local level 4-6 areas of improvement have been selected and structured teams created to analyze the results and identify improvement opportunities.**

Statewide CQI Process
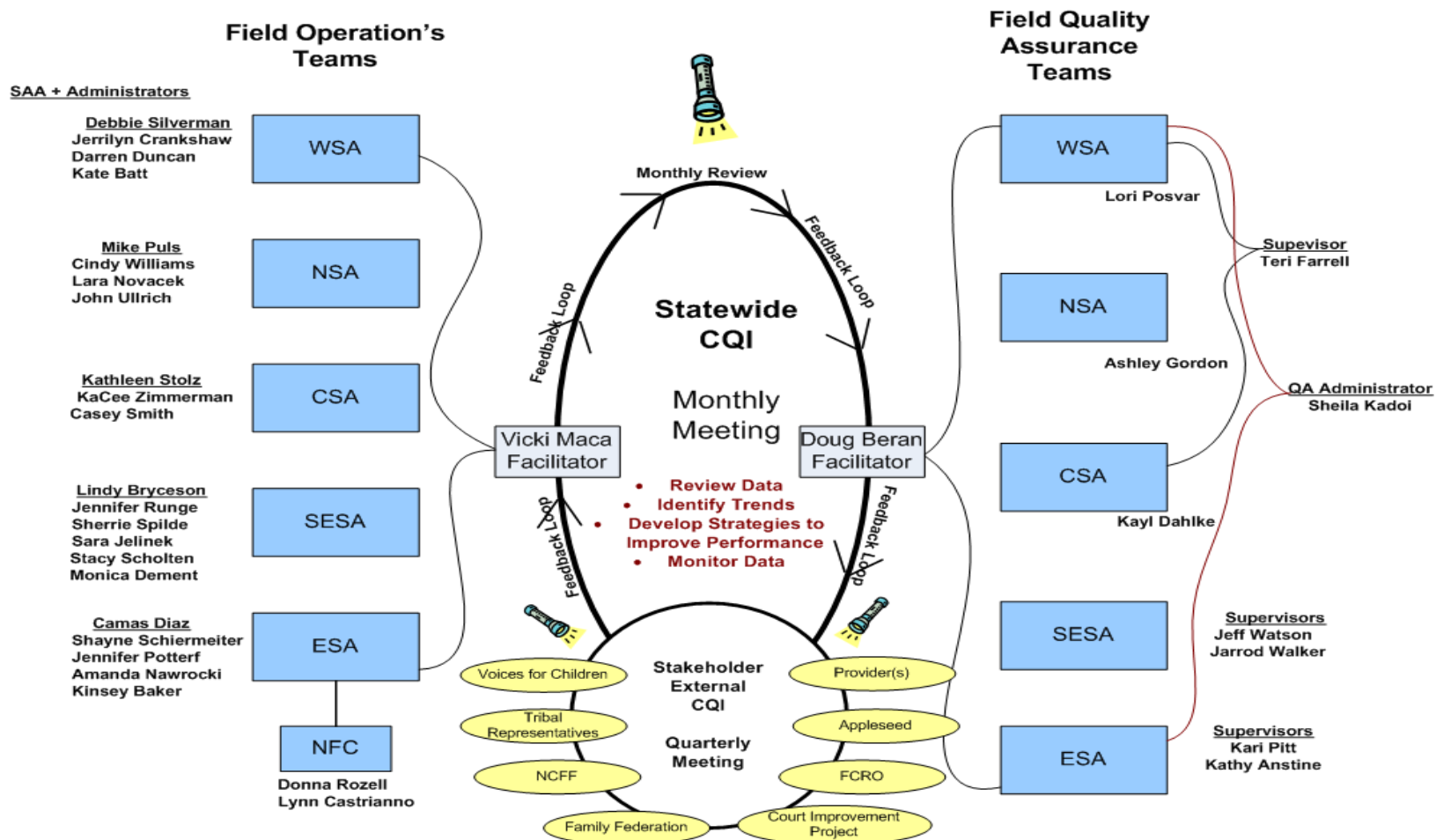
Local CQI Process
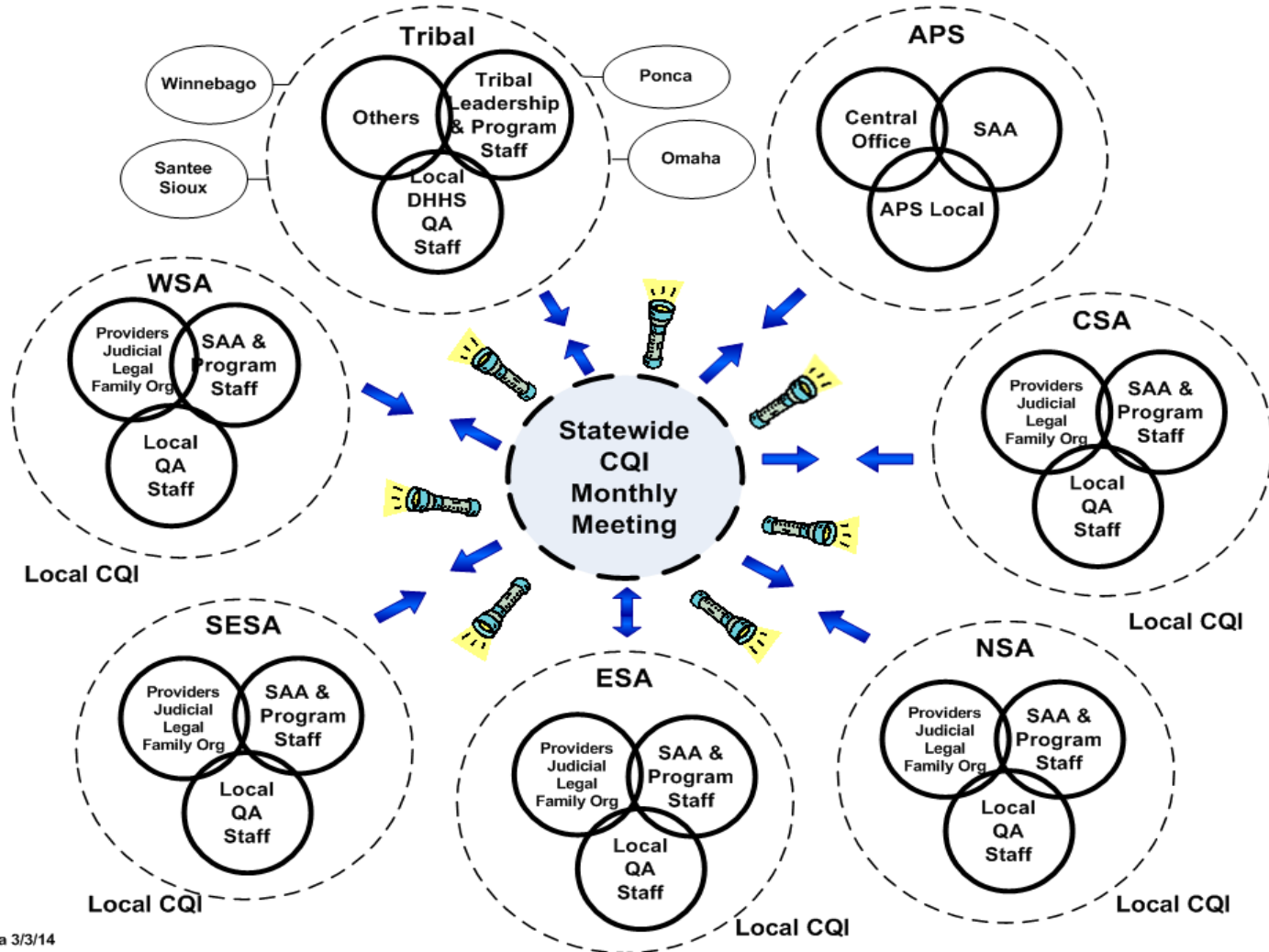
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